%: 25683476 1: 36833

Central Organisation ECHS
Adjutant General's Branch
integrated Headquarters
Ministry of Defence (Army)
ThirmayyaMarg,
Near Gopinath Circle,
Delhi Cantt-110010

B/49769/AG/ECHS

Oct 2023

HQ Southern Command (A/ECHS)
HQ Eastern Command (A/ECHS)
HQ Western Command (A/ECHS)
HQ Northern Command (A/ECHS)
HQ Central Command (A/ECHS)
HQ South Western Command (A/ECHS)
All Regional Centres

IMPLEMENTATION DIRECTIVES OF CDL-2023 IN ECHS

- 1. The SEMOs, are entrusted with the procurement of medicines for the ECHS beneficiaries via DGAFMS Letter No. 19189/DGAFMS/DG-2C/ECHS dated October 10, 2016. The ECHS funds for the procurement of medicine are directly allotted from the DGAFMS office to the three DGMSs, who in turn allot them to the SEMOS under them. The medicines are issued to the polyclinics under the SEMO as per the command-and-control matrix.
 - 2. The primary aim of drug formulation in a medical scheme is to focus on commonly prescribed drugs and formulations so that a maximum number of diseases are reasonably covered and the availability of drugs is ensured. The demands for the drugs in the polyclinics are taken from a module that has a list of more than 4500 drugs and additional items. Due to this vast medicine list, the SEMOs are unable to meet the aspirations of the polyclinics, and as a consequence, many beneficiaries are left to fend for themselves or take the long and cumbersome reimbursement route.
 - 3. Due to the perceived advantages, the implementation of a CDL-2023 is essential. A complete analysis of the existing list of 4500 drugs, considering their therapeutic value, medical necessity, and relevance to the veterans were done. After compiling the list feedback and insights from the senior medical fraternity was taken on the essential drugs. Based on expert input and discussions, final the list of about1500 vital and essential drugs was come upon. Pertinent issues are:-
 - (a) The CDL-2023 will have all the vital and essential drugs, which form 80-90% of the demand but take up less of the budget.
 - (b) The CDL-2023 will have only the standard combinations; all other combinations have been removed from the CDL. As per the CGHS rule, vitamins, food supplements, or nutraceuticals have been not included in the list.
 - (c) Majority of the drugs are aligned to the PVMS number for ease of procurement and to maintain a standard list in all the polyclinics.
 - (d) All the empanelled hospitals will have to be informed that the medicines should be prescribed from this list. If any new drug is required to be added to the list, a detailed essentiality certificate should be forwarded and will follow a due process before inclusion.

- (e) The CDL-2023 that has been prepared is aligned with the CDL of the DGAFMS office. The same is also aligned with the NLEM and revised CGHS (revised) drug list.
- (f) With the implementation, it is essential that the primary goal of the CDL implementation of at least having a 90-95% satisfaction level in terms of medicine availability be achieved.
- (g) The procurement process and the budgetary allotment should be aligned to achieve the goal

Mode of Implementation

- 4. The implementation of the CDL -2023 and transfer to the new system will be done in a gradual and phased manner. The aim is to ensure that the essential drugs are included while eliminating redundancy and non-critical options. Thus, step-by-step implementation strategy to achieve this is as following:-
 - (a) Demands from the polyclinic will be strictly in accordance to the CDL-2023 with immediate effect. The yearly MMF will also be calculated as per CDL-2023. All ALC and NA will also be issued as per the CDL-2023. No NA is to be given for branded drugs, combination drugs, vitamins, or supplements. Only the vitamins can be prescribed, if it is the part of the treatment.
 - (b) Purchase of any drug not in the list will invariably require the concurrence of MD ECHS, if the OIC PC and MOs and SEMO concerned opine so unanimously.

(c) Procurement Adherence.

- (i) The SEMOs will strictly adhere to the policy of procuring medicines only from the CDL-2023, even if inadvertently the monthly or quarterly demands from PCs exceed the same.
- (ii) The RCs will monitor procurement activities and ensure compliance with the CDL-2023 procurement policy. Any addition or changes to the CDL-2023 will be intimated to the SEMO.
- (iii) This demand will be budgeted from the last purchase price and PC/RC will ensure that the demand is realistic based on the requirement after taking stock of the balance medicine. RC will liaise with the CO ECHS to ensure the required budget is available with the SEMO.

(d) <u>Legacy Medicines Management.</u>

- (i) SDCPL will effectively manage the pharmacy Module enabling prescription of legacy medicines while concurrently facilitating prescription and disbursement of medicines from the CDL-2023.
- (ii) SDCPL will put in place a system where only the drugs in the CDL-2023 will demanded from SEMO or be procured through ALC. No NA will be generated for drugs not in the CDL-2023 list.
- (iii) The legacy drugs will continue to be prescribed to beneficiaries till it is exhausted or the medicines expire.

- (v) Drugs in the module that are not part of CDL-2023 will be given a period of 6 months for dispensing or will expire in due course. In the course of six months, the general trend will be visible if the measures have increased the satisfaction level.
 - (vi) Also, if a particular drug is being produced consistently in ALC in many polyclinics, the same may be included in the CDL-2023. Provision in Para 4(b) will strictly apply and sanction of MD ECHS will be obtained on case by case basis.

(e) IT Changes required.

- (i) The IT infrastructure changes needed as per requirement to implement this change have been put in place. This to ensure that demand from PCs are generated per the new CDL-2023 only. Concurrently the legacy drugs in the PCs are available for issue till exhausted it is either due to being prescribed or expired.
- (ii) <u>App Development and Deployment:</u> Develop user-friendly apps for mobile phones that enable MOs to easily convert branded drug compositions into generic formulations available in the new CDL-2023.
- (iv) <u>Training and Adoption:</u>- Conduct training sessions for MOs to effectively use the apps and empower them to prescribe medications from the CDL-2023 accurately.
- (v) Establish a system to regularly update PCs on the contents and changes in the CDL-2023 to obviate violations.
- (vi) The demands and MMF should be system-generated.

(f) Medical Officers' Involvement.

- (i) Provide ongoing training and workshops for Medical Officers (MOs) to update them on the new CDL-2023 and ensure they are well-versed in prescribing medicines from the list.
- (ii) Equip MOs with tools and platforms for real-time updates on legacy drug stock positions to make informed prescribing decisions.
- (iii) Develop training programs to educate healthcare providers about the updated drug list and its implications on clinical practice.
- (iv) Facilitate communication between SEMOs and MOs to advise on the conversion of branded drugs prescribed by Empaneled Hospitals (EHs) to generic compositions available in the CDL-2023.
- (v) After six months, the system will completely switch over to the new CDL-2023.

(g) Stakeholder Communication and Sensitization.

(i) RCs and PCs to conduct ESM awareness programs, including the use of banners, posters, and other visual aids in vernacular languages, to inform beneficiaries about the benefits of the new CDL-2023.

- (ii) Organize training and awareness programs for Officers-in-Charge (OstC) to identify legacy drugs not in the CDL-2023 that might cause concerns among beneficiaries.
- (iii) OsIC should engage in sensitizing beneficiaries about the shift in policy and educate them on alternative medicines available in the CDL-2023. Encourage OsIC to engage with beneficiaries to address their concerns.
- (iv) Organize proactive sensitization efforts by Stn Cdrs and GOsC at ESM Meets, Canteen Stores Department (CSD) outlets, and Zila Sainik Boards (ZSBs). This will help in addressing concerns and fostering understanding among beneficiaries.
- (v) Ensure that all Station Commanders (Stn Cdrs) and General Officers Commanding (GOsC) are aware of the policy shift and the importance of maintaining the safety and security of PC staff. Implement security measures if necessary.
- 5. A monthly monitoring and evaluation system will be in place to track the implementation progress and measure the impact of the CDL-2023. Necessary adjustments to the strategy based on feedback and performance data will be done by CO ECHS.
- 6. For certain drugs which are not in the list that may be needed by an individual veteran or their beneficiary while fwg provisions at Para 4 (b) above the proc is as below:-
 - (a) Additions to the CDL-2023 can be done if the drug is not in the ECHS CDL-2023 but is available in the PVMS, CGHS or NELM list.
 - (b) Any drug which is new to the market can be added after permission from the speciality.
 - (c) A yearly review of the list may be done for revision.
- 7. The SEMOs may ensure a 95–100% satisfaction level. Also, on the new CDL-2023, the SEMO is to put in place an advance plan to ensure the above satisfaction level. The polyclinics should forward realistic MMF based on consumption and the balance in the polyclinics. The SDCPL is tasked to put in place an end-to-end IT system with visibility for all the stakeholders.
- 8. By following this comprehensive implementation plan, a smooth transition to the new CDL of medicines can be achieved while addressing the specified requirements and fostering understanding among all stakeholders.

This has the approval of MD ECHS.

(AC Nishil)

Col

Dir (Med) For MD ECHS

Copy to:-

MoD/DoESW CGDA

UTI- ITSL (BPA)

SDCPL

for info pl.

Internal

All Sec

Stats & Automation Sec UTI-ITSL (BPA). for info

-for uploading on website and issue necessary instr to

EM ID 1 2 4 6 7 9 10 11 18 20 22	10257 10259 10261 10504 11381 11915	IV CANNULA FEBUXOSTAT 80 MG TAB DICLOFENAC 50 MG TAB IBUPROFEN 200 MG TAB IBUPROFEN 100MG/5MG BOTT OF 50 ML SYP	SIZE 1 1 1 1 50	No mg mg mg	DOSAGES	INSTRUCTION After Meal After Meal After Meal	Remarks V V
2 4 6 7 9 10 11 18 20 22	10259 10261 10504 11381	FEBUXOSTAT 80 MG TAB DICLOFENAC 50 MG TAB IBUPROFEN 200 MG TAB IBUPROFEN 100MG/5MG BOTT	1 1 1	mg mg	1 x od	After Meal	V
9 10 11 18 20 22	10259 10261 10504 11381	DICLOFENAC 50 MG TAB IBUPROFEN 200 MG TAB IBUPROFEN 100MG/5MG BOTT	1	mg			
9 10 11 18 20 22	10259 10261 10504 11381	IBUPROFEN 200 MG TAB IBUPROFEN 100MG/5MG BOTT	1		1 x od	After Meal	
7 9 10 11 18 20 22	10261 10504 11381	IBUPROFEN 100MG/5MG BOTT			1 x od	After Meal	V
10 11 18 20 22	11381		00	ml	1 tsp x od	After Meal	D
11 18 20 22		BETHANECHOL 25 MG TAB	1	mg	1 x od	After Meal	D
18 20 22	11915	VORICONAZOLE 200MG TAB	1	mg	1 x od	After Meal	D
20 22		ALPHA KETOANALOGUE 200 MG TAB	1	mg	1 x od	After Meal	D
22	10290	INDOMETHACIN 25 MG CAP	1	mg	1 x od	After Meal	V
25	10302 12089	TACROLIMUS EYE OINT	1 15	mg GM	1 x hs Local apply once a day	After Meal LA	V
	10593	HYDROCORTISONE 5 MG TAB	1	mg	1 x od	After Meal	v
27	11980	TACROLIMUS 0.5 MG TAB	1	mg	1 x od	After Meal	E
28	10320	PHENIRAMINE MALEAT 25MG TAB	1	mg	1 x od	After Meal	E
29	11982	SEVELAMER (FOSEAL) 800 MG TAB	1	mg	1 x od	After Meal	D
31	11785	METFORMIN 500 MG + VILDAGLIPTIN 50 MG TAB	1	mg	1 x od	After Meal	٧
34	11981	SEVELAMER (FOSEAL) 400 MG TAB	1	mg	1 x od	After Meal	D
36		BRIVARACETAM 50MG TAB	1	mg	1 x od	After Meal	D
37	11128	APIXABAN 2.5 MG TAB	1	mg	1 x od	After Meal	V
40	10545	DONEPEZIL 5 MG TAB	1	mg	1 x od	After Meal	E V
41 42	10582	CANAGLIFLOZIN 100 MG TAB CILNIDIPINE 10 MG TAB	1	mg	1 x od 1 x od	After Meal After Meal	E
45	11195	PERINDOPRIL 4 MG TAB	1	mg mg	1 x od	After Meal	E
46	10551	PHENOBARBITONE 30 MG TAB	1	mg	1 x od	After Meal	E
57		NICORANDIL 30 MG TAB	1	mg	1 x od	After Meal	E
58	10601	ALBENDAZOLE 400 MG TAB	1	mg	1 x hs	After Meal	V
67	11628	ADEMETIONINE 400 MG (HEPTRAL)TAB	1	mg	1 x od	After Meal	D
70	10638 10895	ETHAMBUTOL 200 MG TAB LAPATINIB 250 MG TAB	1	mg mg	1 x od 1 x od	After Meal After Meal	E
73	12809	DAPAGLIFOZIN 5MG TAB	1	mg	1 x od	After Meal	V
74	11783	LINAGLIPTIN 5 MG TAB	1	mg	1 x od	After Meal	V
76	11990	SODIUM BICARBONATE- 500MG TAB	1	mg	1 x od	After Meal	V
81	10674	TINIDAZOLE 500MG TAB (TINIBA)	1	mg	1 x od	After Meal	E
85	16723						V D
	10528						E
91							D
93	10843	METHOTREXATE 2.5 MG TAB	1	mg	1 x od	After Meal	٧
94	10870	BICALUTAMIDE 50MG TAB	1	mg	1 x od	After Meal	D
98 100	11618	MESALAMINE SUPPOSITORY NAPHAZOLINE+CMC ED	<u>1</u> 5	mg ML	Local apply once a	After Meal LA	D D
103		KNEE CAPS SIZE M	1	No		SOS	Е
108		FERROUS FUMARATE + FOLIC ACID (HB PLUS/AUTRIN)	1	mg	1 x od	After Meal	Ē
110		ACOTIAMIDE 100MG TAB	1	mg	1 x hs	After Meal	D
112	12670	CILOSTAZOL 100 MG TAB	1	mg	1 x od		D
113	44422	(ACITROM) 2MG TAB		mg			D
115							E
120	11105	DILTIAZEM 90MG SR TAB	1		1 x od	After Meal	V
127		MEGESTROL ACETATE 160MG TAB	1	mg	1 x od	After Meal	D
128		MOXONIDINE 0.2MG TAB	1	mg	1 x od	After Meal	V
130		LEVOCARNITINE 1 GM INJECTION	1	No	1 x od	After Meal	V
121	16601 13202	CAP SIMETHICONE 80 MG AMOXYCILLIN 500 MG + CLAVULINIC ACID 125 MG TAB	1	mg mg	1 x od 1 x od	After Meal After Meal	V
132							
		L S BELT	1	No	sos	LA	D
\(\frac{\{\}}{\{\}}\\\\\\\\\\\\\\\\\\\\\\\\\\	35 36 39 31 33 34 30 00 03 00 03 08 10 12 11 13 14 15 20 27 28 30 31	35 16723 36 199 10528 39 10528 31 11625 33 10843 344 10870 38 11618 00 00 00 00 00 00 00 00 00 00 00 00 00	State	SECTION Color Co	CINIBA C	CINIBA C	TINIBA THYROXINE 75 MCG TAB

						1		
58	140	13237	CIPROFLOXACIN 250MG TAB	1	mg	1 x od	After Meal	V
59	142	13244	DOXYCYCLINE 100MG CAP	1	mg	1 x od	After Meal	V
60	146	13280	ACYCLOVIR 200 MG TAB	1	mg	1 x od	After Meal	V
61	148	20162	INJ RABIPUR VACCINE 1 ML	1	NO	1 x od	SOS	V
62	149	20211	INJ TT (TETANUS TOXOID) 5	1	No	sos	SOS	٧
			` ML					
63	151	11126	AMIODARONE (150MG) INJ ,	1	No	1 x od	SOS	V
			3ML	-				•
64	157	11142	ATENOLOL 25 MG TAB	1	mg	1 x od	After Meal	V
				1				
65	160	12371	VILAZODONE 20 MG TAB		mg	1 x od	After Meal	D
66	165	12346	ETIZOLAM 0.5MG TAB	1	mg	1 x hs	After Meal	V
67	168	11164	ASPIRIN 75MG TAB	1	mg	1 x hs	After Meal	V
68	169	11168	CLOPIDOGREL (75MG) TAB	1	mg	1 x od	After Meal	V
69	174	11174	ASPIRIN 150MG TAB	1	mg	1 x hs	After Meal	E
70	182	11186	LOSARTAN 25MG TAB	1	mg	1 x od	After Meal	V
71	187	11113	NICORANDIL 10MG TAB	1	mg	1 x od	After Meal	E
72	188	11193	ENALAPRIL 5 MG TAB	1	mg	1 x od	After Meal	٧
73	198	11346	MUPIROCIN 2% OINT 5 GM	5	gm	Local apply once a	LA	V
-						dav		
74	199	11323	CLOTRIMAZOLE DUSTING	100	gm	Local apply once a	LA	Е
, ,	133	11020	POWDER BOTT OF 100	.00	9			_
						day		
	000		GM(CANDID FOOT POWDER)				000	_
75	200		SOFT CERVICAL COLLAR	1	No	sos	sos	D
			(SIZE-M)					
76	201	11328	FEXOFENADINE 180MG TAB	1	mg	1 x od	After Meal	V
77	203	12342	CLOZAPINE 25 MG TAB	1	mg	1 x od	After Meal	V
78	206	11344	METRONIDAZOLE 30GM OINT	15	gm	Local apply once a	LA	D
						day		
79	209	11350	PERMETHRIN (5% W/W) TUBE	30	gm	Local apply once a	LA	٧
	_,,		OF 30 GM		5	day		,
80	211		SILVER SULFADIAZINE 1%	1	No	sos	LA	V
30	211			'	140	505	LA	•
0.4	040		OINT 500 GMS JAR	=-				_
81	212		UREA CREAM 50 GM	50	gm	Local apply once a	LA	D
						dav		
82	213		DETTOL	100	ml	sos	LA	V
83	214		SODIUM CHLORIDE (6% W/W)	15	gm	Local apply once a	LA	E
			EYE OINT(HYPERSOL-6)			day		
84	216	10572	ADALIMUMAB (40MG/0.8ML)	1	No	1 x od	After Meal	E
			INJ					
85	228	16111	OLMESARTAN 20 MG TAB	1	mg	1 x od	After Meal	Е
86	236	11171	ENOXAPARIN 60MG INJ	1			After Meal	V
00								
0.7					No	1 x od		_
87	238	11622	DICYCLOMINE (10MG) +	1	mg	sos	anytime	E
87								_
	238		DICYCLOMINE (10MG) + MEFENAMIC ACID (250MG) TAB	1	mg	sos	anytime	Ē
88	238	11622	DICYCLOMINE (10MG) + MEFENAMIC ACID (250MG) TAB TADALAFIL 10MG TAB	1	mg	sos 1 x od	anytime After Meal	E
88 89	238 239 240		DICYCLOMINE (10MG) + MEFENAMIC ACID (250MG) TAB TADALAFIL 10MG TAB EXEMESTANE 25 MG TAB	1 1 1	mg mg mg	sos 1 x od 1 x od	anytime After Meal After Meal	E D D
88	238	11622	DICYCLOMINE (10MG) + MEFENAMIC ACID (250MG) TAB TADALAFIL 10MG TAB	1	mg	sos 1 x od	anytime After Meal	E
88 89	238 239 240	11622	DICYCLOMINE (10MG) + MEFENAMIC ACID (250MG) TAB TADALAFIL 10MG TAB EXEMESTANE 25 MG TAB	1 1 1	mg mg mg	sos 1 x od 1 x od	anytime After Meal After Meal	E D D
88 89	238 239 240	11622	DICYCLOMINE (10MG) + MEFENAMIC ACID (250MG) TAB TADALAFIL 10MG TAB EXEMESTANE 25 MG TAB CREMAFFIN(LIQUID PARAFFIN	1 1 1	mg mg mg	sos 1 x od 1 x od	anytime After Meal After Meal	E D D
88 89	238 239 240	11622	DICYCLOMINE (10MG) + MEFENAMIC ACID (250MG) TAB TADALAFIL 10MG TAB EXEMESTANE 25 MG TAB CREMAFFIN LIQUID PARAFFIN 1.25MG+MAGNESIUM	1 1 1	mg mg mg	sos 1 x od 1 x od	anytime After Meal After Meal	E D D
88 89	238 239 240	11622	DICYCLOMINE (10MG) + MEFENAMIC ACID (250MG) TAB TADALAFIL 10MG TAB EXEMESTANE 25 MG TAB CREMAFFIN LIQUID PARAFFIN 1.25MG+MAGNESIUM HYDROXIDE 3.75MG+SODIUM	1 1 1	mg mg mg	sos 1 x od 1 x od	anytime After Meal After Meal	E D D
88 89	238 239 240	11622	DICYCLOMINE (10MG) + MEFENAMIC ACID (250MG) TAB TADALAFIL 10MG TAB EXEMESTANE 25 MG TAB CREMAFFIN(LIQUID PARAFFIN 1.25MG+MAGNESIUM HYDROXIDE 3.75MG+SODIUM PICOSULPHATE 3.3MG) 170ML	1 1 1	mg mg mg	sos 1 x od 1 x od	anytime After Meal After Meal	E D D
88 89	238 239 240	11622	DICYCLOMINE (10MG) + MEFENAMIC ACID (250MG) TAB TADALAFIL 10MG TAB EXEMESTANE 25 MG TAB CREMAFFIN LIQUID PARAFFIN 1.25MG+MAGNESIUM HYDROXIDE 3.75MG+SODIUM	1 1 1	mg mg mg	sos 1 x od 1 x od	anytime After Meal After Meal	E D D
88 89 90	238 239 240 241	11622	DICYCLOMINE (10MG) + MEFENAMIC ACID (250MG) TAB TADALAFIL 10MG TAB EXEMESTANE 25 MG TAB CREMAFFIN(LIQUID PARAFFIN 1.25MG+MAGNESIUM HYDROXIDE 3.75MG+SODIUM PICOSULPHATE 3.3MG) 170ML SYP	1 1 1 170	mg mg mg	1 x od 1 x od 1 tsp x od	After Meal After Meal After Meal After Meal	E D D V
88 89 90	238 239 240 241	11622	DICYCLOMINE (10MG) + MEFENAMIC ACID (250MG) TAB TADALAFIL 10MG TAB EXEMESTANE 25 MG TAB CREMAFFIN(LIQUID PARAFFIN 1.25MG+MAGNESIUM HYDROXIDE 3.75MG+SODIUM PICOSULPHATE 3.3MG) 170ML SYP GLOVES	1 1 1 170	mg mg mg	1 x od 1 x od 1 tsp x od	After Meal After Meal After Meal After Meal	E D D V
88 89 90	238 239 240 241	11622	DICYCLOMINE (10MG) + MEFENAMIC ACID (250MG) TAB TADALAFIL 10MG TAB EXEMESTANE 25 MG TAB CREMAFFIN (LIQUID PARAFFIN 1.25MG+MAGNESIUM HYDROXIDE 3.75MG+SODIUM PICOSULPHATE 3.3MG) 170ML SYP GLOVES FORMOTEROL (6MCG) +	1 1 1 170	mg mg mg	1 x od 1 x od 1 tsp x od	After Meal After Meal After Meal After Meal	E D D V
88 89 90	238 239 240 241	11622	DICYCLOMINE (10MG) + MEFENAMIC ACID (250MG) TAB TADALAFIL 10MG TAB EXEMESTANE 25 MG TAB CREMAFFIN(LIQUID PARAFFIN 1.25MG+MAGNESIUM HYDROXIDE 3.75MG+SODIUM PICOSULPHATE 3.3MG) 170ML SYP GLOVES FORMOTEROL (6MCG) + BUDESONIDE (400MCG)	1 1 1 170	mg mg mg	1 x od 1 x od 1 tsp x od	After Meal After Meal After Meal After Meal	E D D V
88 89 90	238 239 240 241 241	11622	DICYCLOMINE (10MG) + MEFENAMIC ACID (250MG) TAB TADALAFIL 10MG TAB EXEMESTANE 25 MG TAB CREMAFFIN(LIQUID PARAFFIN 1.25MG+MAGNESIUM HYDROXIDE 3.75MG+SODIUM PICOSULPHATE 3.3MG) 170ML SYP GLOVES FORMOTEROL (6MCG) + BUDESONIDE (400MCG) ROTACAP	1 1 1 1 1 1 1 1	mg mg mg ml	sos 1 x od 1 x od 1 tsp x od 1 tsp x od	After Meal After Meal After Meal After Meal SOS After Meal	E D D V V V
88 89 90	238 239 240 241	11622	DICYCLOMINE (10MG) + MEFENAMIC ACID (250MG) TAB TADALAFIL 10MG TAB EXEMESTANE 25 MG TAB CREMAFFIN(LIQUID PARAFFIN 1.25MG+MAGNESIUM HYDROXIDE 3.75MG+SODIUM PICOSULPHATE 3.3MG) 170ML SYP GLOVES FORMOTEROL (6MCG) + BUDESONIDE (400MCG) ROTACAP NORFLOXACIN (400MG) +	1 1 1 170	mg mg mg	1 x od 1 x od 1 tsp x od	After Meal After Meal After Meal After Meal	E D D V
91 92 93	238 239 240 241 241 242 245	11622	DICYCLOMINE (10MG) + MEFENAMIC ACID (250MG) TAB TADALAFIL 10MG TAB EXEMESTANE 25 MG TAB CREMAFFIN (LIQUID PARAFFIN 1.25MG+MAGNESIUM HYDROXIDE 3.75MG+SODIUM PICOSULPHATE 3.3MG) 170ML SYP GLOVES FORMOTEROL (6MCG) + BUDESONIDE (400MCG) ROTACAP NORFLOXACIN (400MG) + TINIDAZOLE (600MG) TAB	1 1 170 170	mg mg mg ml	sos 1 x od 1 x od 1 tsp x od 1 tsp x od	After Meal After Meal After Meal After Meal SOS After Meal After Meal	D D V V V V
91 92 93	238 239 240 241 241 242 245 246	11622 10873 11687 11688	DICYCLOMINE (10MG) + MEFENAMIC ACID (250MG) TAB TADALAFIL 10MG TAB EXEMESTANE 25 MG TAB CREMAFFIN(LIQUID PARAFFIN 1.25MG+MAGNESIUM HYDROXIDE 3.75MG+SODIUM PICOSULPHATE 3.3MG) 170ML SYP GLOVES FORMOTEROL (6MCG) + BUDESONIDE (400MCG) ROTACAP NORFLOXACIN (400MG) + TINIDAZOLE (600MG) TAB ORS SACHET	1 1 1 170	mg mg mg ml	sos 1 x od 1 x od 1 tsp x od 1 tsp x od	After Meal After Meal After Meal After Meal SOS After Meal After Meal	E D D V V V
91 92 93	238 239 240 241 241 242 245	11622	DICYCLOMINE (10MG) + MEFENAMIC ACID (250MG) TAB TADALAFIL 10MG TAB EXEMESTANE 25 MG TAB CREMAFFIN (LIQUID PARAFFIN 1.25MG+MAGNESIUM HYDROXIDE 3.75MG+SODIUM PICOSULPHATE 3.3MG) 170ML SYP GLOVES FORMOTEROL (6MCG) + BUDESONIDE (400MCG) ROTACAP NORFLOXACIN (400MG) + TINIDAZOLE (600MG) TAB	1 1 170 170	mg mg mg ml	sos 1 x od 1 x od 1 tsp x od 1 tsp x od 1 x hs	After Meal After Meal After Meal After Meal SOS After Meal After Meal	D D V V V V
91 92 93	238 239 240 241 241 242 245 246	11622 10873 11687 11688	DICYCLOMINE (10MG) + MEFENAMIC ACID (250MG) TAB TADALAFIL 10MG TAB EXEMESTANE 25 MG TAB CREMAFFIN(LIQUID PARAFFIN 1.25MG+MAGNESIUM HYDROXIDE 3.75MG+SODIUM PICOSULPHATE 3.3MG) 170ML SYP GLOVES FORMOTEROL (6MCG) + BUDESONIDE (400MCG) ROTACAP NORFLOXACIN (400MG) + TINIDAZOLE (600MG) TAB ORS SACHET	1 1 1 170	mg mg mg ml	1 x od	After Meal After Meal After Meal After Meal SOS After Meal After Meal	D D V V V V
91 92 93	238 239 240 241 241 242 245 246	11622 10873 11687 11688	DICYCLOMINE (10MG) + MEFENAMIC ACID (250MG) TAB TADALAFIL 10MG TAB EXEMESTANE 25 MG TAB CREMAFFIN(LIQUID PARAFFIN 1.25MG+MAGNESIUM HYDROXIDE 3.75MG+SODIUM PICOSULPHATE 3.3MG) 170ML SYP GLOVES FORMOTEROL (6MCG) + BUDESONIDE (400MCG) ROTACAP NORFLOXACIN (400MG) + TINIDAZOLE (600MG) TAB ORS SACHET INJ NANDROLONE	1 1 1 170	mg mg mg ml	1 x od	After Meal After Meal After Meal After Meal SOS After Meal After Meal	D D V V V V
91 92 93 94 95	238 239 240 241 242 245 246 247 250	11622 10873 11687 11688 11710	DICYCLOMINE (10MG) + MEFENAMIC ACID (250MG) TAB TADALAFIL 10MG TAB EXEMESTANE 25 MG TAB CREMAFFIN(LIQUID PARAFFIN 1.25MG+MAGNESIUM HYDROXIDE 3.75MG+SODIUM PICOSULPHATE 3.3MG) 170ML SYP GLOVES FORMOTEROL (6MCG) + BUDESONIDE (400MCG) ROTACAP NORFLOXACIN (400MG) + TINIDAZOLE (600MG) TAB ORS SACHET INJ NANDROLONE DECANOATE 25MG/ML INDACATEROL (110MCG) +	1 1 170 170	mg mg mg ml No No No No No	sos 1 x od 1 x od 1 x od 1 tsp x od 1 tsp x od 1 x hs sos sos sos	After Meal After Meal After Meal After Meal SOS After Meal SOS After Meal After Meal	E D D V V V V V V V
91 92 93 94 95	238 239 240 241 242 245 246 247 250	11622 10873 11687 11688 11710	DICYCLOMINE (10MG) + MEFENAMIC ACID (250MG) TAB TADALAFIL 10MG TAB EXEMESTANE 25 MG TAB CREMAFFIN (LIQUID PARAFFIN 1.25MG+MAGNESIUM HYDROXIDE 3.75MG+SODIUM PICOSULPHATE 3.3MG) 170ML SYP GLOVES FORMOTEROL (6MCG) + BUDESONIDE (400MCG) ROTACAP NORFLOXACIN (400MG) + TINIDAZOLE (600MG) TAB ORS SACHET INJ NANDROLONE DECANOATE 25MG/ML INDACATEROL (110MCG) + GLYCOPYRROLATE (50MCG)	1 1 170 170	mg mg mg ml No No No No No	sos 1 x od 1 x od 1 x od 1 tsp x od 1 tsp x od 1 x hs sos sos sos	After Meal After Meal After Meal After Meal SOS After Meal SOS After Meal After Meal	E D D V V V V V V V
91 92 93 94 95	238 239 240 241 242 245 246 247 250 251	11622 10873 11687 11688 11710	DICYCLOMINE (10MG) + MEFENAMIC ACID (250MG) TAB TADALAFIL 10MG TAB EXEMESTANE 25 MG TAB CREMAFFIN(LIQUID PARAFFIN 1.25MG+MAGNESIUM HYDROXIDE 3.75MG+SODIUM PICOSULPHATE 3.3MG) 170ML SYP GLOVES FORMOTEROL (6MCG) + BUDESONIDE (400MCG) ROTACAP NORFLOXACIN (400MG) + TINIDAZOLE (600MG) TAB ORS SACHET INJ NANDROLONE DECANOATE 25MG/ML INDACATEROL (110MCG) + GLYCOPYRROLATE (50MCG) ROTACAP	1 1 170 170	mg mg mg ml No No No No No No	1 x od	After Meal After Meal After Meal After Meal SOS After Meal SOS After Meal After Meal After Meal	E D D V V V V V
91 92 93 94 95	238 239 240 241 242 245 246 247 250	11622 10873 11687 11688 11710	DICYCLOMINE (10MG) + MEFENAMIC ACID (250MG) TAB TADALAFIL 10MG TAB EXEMESTANE 25 MG TAB CREMAFFIN(LIQUID PARAFFIN 1.25MG+MAGNESIUM HYDROXIDE 3.75MG+SODIUM PICOSULPHATE 3.3MG) 170ML SYP GLOVES FORMOTEROL (6MCG) + BUDESONIDE (400MCG) ROTACAP NORFLOXACIN (400MG) TAB ORS SACHET INJ NANDROLONE DECANOATE 25MG/ML INDACATEROL (110MCG) + GLYCOPYRROLATE (50MCG) ROTACAP CLOTRIMAZOLE 100MG	1 1 170 170	mg mg mg ml No	sos 1 x od 1 x od 1 x od 1 tsp x od 1 tsp x od 1 x hs sos sos sos	After Meal After Meal After Meal After Meal SOS After Meal SOS After Meal After Meal	E D D V V V V V V V
91 92 93 94 95 96	238 239 240 241 241 242 245 246 247 250 251	11622 10873 11687 11688 11710	DICYCLOMINE (10MG) + MEFENAMIC ACID (250MG) TAB TADALAFIL 10MG TAB EXEMESTANE 25 MG TAB CREMAFFIN(LIQUID PARAFFIN 1.25MG+MAGNESIUM HYDROXIDE 3.75MG+SODIUM PICOSULPHATE 3.3MG) 170ML SYP GLOVES FORMOTEROL (6MCG) + BUDESONIDE (400MCG) ROTACAP NORFLOXACIN (400MG) + TINIDAZOLE (600MG) TAB ORS SACHET INJ NANDROLONE DECANOATE 25MG/ML INDACATEROL (110MCG) + GLYCOPYRROLATE (50MCG) ROTACAP CLOTRIMAZOLE 100MG (VAGINAL TABLETS)	1 1 1 170 1 1 1 1	mg mg mg ml No No No No No mg	1 x od	After Meal After Meal After Meal After Meal SOS After Meal SOS After Meal After Meal LA	E D D V V V V V V
91 92 93 94 95	238 239 240 241 242 245 246 247 250 251	11622 10873 11687 11688 11710	DICYCLOMINE (10MG) + MEFENAMIC ACID (250MG) TAB TADALAFIL 10MG TAB EXEMESTANE 25 MG TAB CREMAFFIN (LIQUID PARAFFIN 1.25MG+MAGNESIUM HYDROXIDE 3.75MG+SODIUM PICOSULPHATE 3.3MG) 170ML SYP GLOVES FORMOTEROL (6MCG) + BUDESONIDE (400MCG) ROTACAP NORFLOXACIN (400MG) + TINIDAZOLE (600MG) TAB ORS SACHET INJ NANDROLONE DECANOATE 25MG/ML INDACATEROL (110MCG) + GLYCOPYRROLATE (50MCG) ROTACAP CLOTRIMAZOLE 100MG (VAGINAL TABLETS) POVIDONE IODINE 200 MG	1 1 170 170	mg mg mg ml No No No No No No	1 x od	After Meal After Meal After Meal After Meal SOS After Meal SOS After Meal After Meal After Meal	E D D V V V V V
91 92 93 94 95 96	238 239 240 241 241 242 245 246 247 250 251 253 254	11622 10873 11687 11688 11710 10625	DICYCLOMINE (10MG) + MEFENAMIC ACID (250MG) TAB TADALAFIL 10MG TAB EXEMESTANE 25 MG TAB CREMAFFIN (LIQUID PARAFFIN 1.25MG+MAGNESIUM HYDROXIDE 3.75MG+SODIUM PICOSULPHATE 3.3MG) 170ML SYP GLOVES FORMOTEROL (6MCG) + BUDESONIDE (400MCG) ROTACAP NORFLOXACIN (400MG) + TINIDAZOLE (600MG) TAB ORS SACHET INJ NANDROLONE DECANOATE 25MG/ML INDACATEROL (110MCG) + GLYCOPYRROLATE (50MCG) ROTACAP CLOTRIMAZOLE 100MG (VAGINAL TABLETS) POVIDONE IODINE 200 MG PESSARY	1 1 1 170 1 1 1 1 1	mg mg mg ml No No No No No mg mg	sos 1 x od 1 x od 1 x od 1 tsp x od 1 tsp x od 1 x hs sos sos 1 x od 1 x hs 1 x od	After Meal After Meal After Meal After Meal After Meal SOS After Meal SOS After Meal LA SOS	E D D V V V V V V E
91 92 93 94 95 96	238 239 240 241 241 242 245 246 247 250 251	11622 10873 11687 11688 11710	DICYCLOMINE (10MG) + MEFENAMIC ACID (250MG) TAB TADALAFIL 10MG TAB EXEMESTANE 25 MG TAB CREMAFFIN(LIQUID PARAFFIN 1.25MG+MAGNESIUM HYDROXIDE 3.75MG+SODIUM PICOSULPHATE 3.3MG) 170ML SYP GLOVES FORMOTEROL (6MCG) + BUDESONIDE (400MCG) ROTACAP NORFLOXACIN (400MG) TAB ORS SACHET INJ NANDROLONE DECANOATE 25MG/ML INDACATEROL (110MCG) + GLYCOPYRROLATE (50MCG) ROTACAP CLOTRIMAZOLE 100MG (VAGINAL TABLETS) POVIDONE IODINE 200 MG PESSARY ISOXSUPRINE (5MG/ML) AMP	1 1 1 170 1 1 1 1	mg mg mg ml No No No No No mg	1 x od	After Meal After Meal After Meal After Meal SOS After Meal SOS After Meal After Meal LA	E D D V V V V V
91 92 93 94 95 96 97 98	238 239 240 241 241 242 245 246 247 250 251 253 254	11622 10873 11687 11688 11710 10625 11739	DICYCLOMINE (10MG) + MEFENAMIC ACID (250MG) TAB TADALAFIL 10MG TAB EXEMESTANE 25 MG TAB CREMAFFIN(LIQUID PARAFFIN 1.25MG+MAGNESIUM HYDROXIDE 3.75MG+SODIUM PICOSULPHATE 3.3MG) 170ML SYP GLOVES FORMOTEROL (6MCG) + BUDESONIDE (400MCG) ROTACAP NORFLOXACIN (400MG) + TINIDAZOLE (600MG) TAB ORS SACHET INJ NANDROLONE DECANOATE 25MG/ML INDACATEROL (110MCG) + GLYCOPYRROLATE (50MCG) ROTACAP CLOTRIMAZOLE 100MG (VAGINAL TABLETS) POVIDONE IODINE 200 MG PESSARY ISOXSUPRINE (5MG/ML) AMP OF 2 ML INJ	1 1 1 170 1 1 1 1 1	mg mg mg ml No	1 x od	After Meal After Meal After Meal After Meal After Meal SOS After Meal After Meal LA SOS SOS	D D V V V V V V E E E
91 92 93 94 95 96 97 98 99	238 239 240 241 241 242 245 246 247 250 251 253 254 256	11622 10873 11687 11688 11710 10625 11739	DICYCLOMINE (10MG) + MEFENAMIC ACID (250MG) TAB TADALAFIL 10MG TAB EXEMESTANE 25 MG TAB CREMAFFIN (LIQUID PARAFFIN 1.25MG+MAGNESIUM HYDROXIDE 3.75MG+SODIUM PICOSULPHATE 3.3MG) 170ML SYP GLOVES FORMOTEROL (6MCG) + BUDESONIDE (400MCG) ROTACAP NORFLOXACIN (400MG) + TINIDAZOLE (600MG) TAB ORS SACHET INJ NANDROLONE DECANOATE 25MG/ML INDACATEROL (110MCG) + GLYCOPYRROLATE (50MCG) ROTACAP CLOTRIMAZOLE 100MG (YAGINAL TABLETS) POVIDONE IODINE 200 MG PESSARY ISOXSUPRINE (5MG/ML) AMP OF 2 ML INJ VOGLIBOSE 0.2MG TAB	1 1 1 170 1 1 1 1 1 1	mg mg mg ml No No No No No mg mg	1 x od	After Meal After Meal After Meal After Meal SOS After Meal SOS After Meal LA SOS SOS WITH MEAL	E D D V V V V V E E E V
91 92 93 94 95 96 97 98	238 239 240 241 241 242 245 246 247 250 251 253 254	11622 10873 11687 11688 11710 10625 11739	DICYCLOMINE (10MG) + MEFENAMIC ACID (250MG) TAB TADALAFIL 10MG TAB EXEMESTANE 25 MG TAB CREMAFFIN(LIQUID PARAFFIN 1.25MG+MAGNESIUM HYDROXIDE 3.75MG+SODIUM PICOSULPHATE 3.3MG) 170ML SYP GLOVES FORMOTEROL (6MCG) + BUDESONIDE (400MCG) ROTACAP NORFLOXACIN (400MG) + TINIDAZOLE (600MG) TAB ORS SACHET INJ NANDROLONE DECANOATE 25MG/ML INDACATEROL (110MCG) + GLYCOPYRROLATE (50MCG) ROTACAP CLOTRIMAZOLE 100MG (VAGINAL TABLETS) POVIDONE IODINE 200 MG PESSARY ISOXSUPRINE (5MG/ML) AMP OF 2 ML INJ	1 1 1 170 1 1 1 1 1	mg mg mg ml No	1 x od	After Meal After Meal After Meal After Meal After Meal SOS After Meal After Meal LA SOS SOS	D D V V V V V V E E E
91 92 93 94 95 96 97 98 99	238 239 240 241 241 242 245 246 247 250 251 253 254 256	11622 10873 11687 11688 11710 10625 11739	DICYCLOMINE (10MG) + MEFENAMIC ACID (250MG) TAB TADALAFIL 10MG TAB EXEMESTANE 25 MG TAB CREMAFFIN (LIQUID PARAFFIN 1.25MG+MAGNESIUM HYDROXIDE 3.75MG+SODIUM PICOSULPHATE 3.3MG) 170ML SYP GLOVES FORMOTEROL (6MCG) + BUDESONIDE (400MCG) ROTACAP NORFLOXACIN (400MG) + TINIDAZOLE (600MG) TAB ORS SACHET INJ NANDROLONE DECANOATE 25MG/ML INDACATEROL (110MCG) + GLYCOPYRROLATE (50MCG) ROTACAP CLOTRIMAZOLE 100MG (YAGINAL TABLETS) POVIDONE IODINE 200 MG PESSARY ISOXSUPRINE (5MG/ML) AMP OF 2 ML INJ VOGLIBOSE 0.2MG TAB	1 1 1 170 1 1 1 1 1 1	mg mg mg ml No No No No Mo	1 x od	After Meal After Meal After Meal After Meal SOS After Meal SOS After Meal LA SOS SOS WITH MEAL	E D D V V V V V E E E V
91 92 93 94 95 96 97 98 99	238 239 240 241 241 242 245 246 247 250 251 253 254 256	11622 10873 11687 11688 11710 10625 11739	DICYCLOMINE (10MG) + MEFENAMIC ACID (250MG) TAB TADALAFIL 10MG TAB EXEMESTANE 25 MG TAB CREMAFFIN (LIQUID PARAFFIN 1.25MG+MAGNESIUM HYDROXIDE 3.75MG+SODIUM PICOSULPHATE 3.3MG) 170ML SYP GLOVES FORMOTEROL (6MCG) + BUDESONIDE (400MCG) ROTACAP NORFLOXACIN (400MG) + TINIDAZOLE (600MG) TAB ORS SACHET INJ NANDROLONE DECANOATE 25MG/ML INDACATEROL (110MCG) + GLYCOPYRROLATE (50MCG) ROTACAP CLOTRIMAZOLE 100MG (VAGINAL TABLETS) POVIDONE 10DINE 200 MG PESSARY ISOXSUPRINE (5MG/ML) AMP OF 2 ML INJ VOGLIBOSE 0.2MG TAB INSULIN ISOPHANE/NPH (70%)	1 1 1 170 1 1 1 1 1 1 1 1	mg mg mg ml No No No No No No No No MG mg	1 x od	After Meal After Meal After Meal After Meal After Meal SOS After Meal SOS After Meal LA SOS SOS WITH MEAL WITH MEAL	E D D V V V V V E E V V V
91 92 93 94 95 96 97 98 99	238 239 240 241 241 242 245 246 247 250 251 253 254 256	11622 10873 11687 11688 11710 10625 11739	DICYCLOMINE (10MG) + MEFENAMIC ACID (250MG) TAB TADALAFIL 10MG TAB EXEMESTANE 25 MG TAB CREMAFFIN (LIQUID PARAFFIN 1.25MG+MAGNESIUM HYDROXIDE 3.75MG+SODIUM PICOSULPHATE 3.3MG) 170ML SYP GLOVES FORMOTEROL (6MCG) + BUDESONIDE (400MCG) ROTACAP NORFLOXACIN (400MG) + TINIDAZOLE (600MG) TAB ORS SACHET INJ NANDROLONE DECANOATE 25MG/ML INDACATEROL (110MCG) + GLYCOPYRROLATE (50MCG) ROTACAP CLOTRIMAZOLE 100MG (VAGINAL TABLETS) POVIDONE IODINE 200 MG PESSARY ISOXSUPRINE (5MG/ML) AMP OF 2 ML INJ VOGLIBOSE 0.3MG TAB INSULIN ISOPHANE/NPH (70%) + HUMAN INSULIN/SOLUBLE	1 1 1 170 1 1 1 1 1 1 1 1	mg mg mg ml No No No No No No No No MG mg	1 x od	After Meal After Meal After Meal After Meal After Meal SOS After Meal SOS After Meal LA SOS SOS WITH MEAL WITH MEAL	E D D V V V V V E E V V V
91 92 93 94 95 96 97 98 99	238 239 240 241 241 242 245 246 247 250 251 253 254 256	11622 10873 11687 11688 11710 10625 11739	DICYCLOMINE (10MG) + MEFENAMIC ACID (250MG) TAB TADALAFIL 10MG TAB EXEMESTANE 25 MG TAB CREMAFFIN(LIQUID PARAFFIN 1.25MG+MAGNESIUM HYDROXIDE 3.75MG+SODIUM PICOSULPHATE 3.3MG) 170ML SYP GLOVES FORMOTEROL (6MCG) + BUDESONIDE (400MCG) ROTACAP NORFLOXACIN (400MG) TAB ORS SACHET INJ NANDROLONE DECANOATE 25MG/ML INDACATEROL (110MCG) + GLYCOPYRROLATE (50MCG) ROTACAP CLOTRIMAZOLE 100MG (YAGINAL TABLETS) POVIDONE IODINE 200 MG PESSARY ISOXSUPRINE (5MG/ML) AMP OF 2 ML INJ VOGLIBOSE 0.2MG TAB INSULIN ISOPHANE/NPH (70%) + HUMAN INSULIN/SOLUBLE INSULIN (30%) (MIXTARD 30	1 1 1 170 1 1 1 1 1 1 1 1	mg mg mg ml No No No No No No No No MG mg	1 x od	After Meal After Meal After Meal After Meal After Meal SOS After Meal SOS After Meal LA SOS SOS WITH MEAL WITH MEAL	E D D V V V V V E E V V V
91 92 93 94 95 96 97 98 99	238 239 240 241 241 242 245 246 247 250 251 253 254 256	11622 10873 11687 11688 11710 10625 11739	DICYCLOMINE (10MG) + MEFENAMIC ACID (250MG) TAB TADALAFIL 10MG TAB EXEMESTANE 25 MG TAB CREMAFFIN (LIQUID PARAFFIN 1.25MG+MAGNESIUM HYDROXIDE 3.75MG+SODIUM PICOSULPHATE 3.3MG) 170ML SYP GLOVES FORMOTEROL (6MCG) + BUDESONIDE (400MCG) ROTACAP NORFLOXACIN (400MG) + TINIDAZOLE (600MG) TAB ORS SACHET INJ NANDROLONE DECANOATE 25MG/ML INDACATEROL (110MCG) + GLYCOPYRROLATE (50MCG) ROTACAP CLOTRIMAZOLE 100MG (VAGINAL TABLETS) POVIDONE IODINE 200 MG PESSARY ISOXSUPRINE (5MG/ML) AMP OF 2 ML INJ VOGLIBOSE 0.3MG TAB INSULIN ISOPHANE/NPH (70%) + HUMAN INSULIN/SOLUBLE	1 1 1 170 1 1 1 1 1 1 1 1	mg mg mg ml No No No No No No No No MG mg	1 x od	After Meal After Meal After Meal After Meal After Meal SOS After Meal SOS After Meal LA SOS SOS WITH MEAL WITH MEAL	E D D V V V V V E E V V V
91 92 93 94 95 96 97 98 99 100 101	238 239 240 241 241 242 245 246 247 250 251 253 254 256	11622 10873 11687 11688 11710 10625 11739	DICYCLOMINE (10MG) + MEFENAMIC ACID (250MG) TAB TADALAFIL 10MG TAB EXEMESTANE 25 MG TAB CREMAFFIN (LIQUID PARAFFIN 1.25MG+MAGNESIUM HYDROXIDE 3.75MG+SODIUM PICOSULPHATE 3.3MG) 170ML SYP GLOVES FORMOTEROL (6MCG) + BUDESONIDE (400MCG) ROTACAP NORFLOXACIN (400MG) + TINIDAZOLE (600MG) TAB ORS SACHET INJ NANDROLONE DECANOATE 25MG/ML INDACATEROL (110MCG) + GLYCOPYRROLATE (50MCG) ROTACAP CLOTRIMAZOLE 100MG (VAGINAL TABLETS) POVIDONE 10DINE 200 MG PESSARY ISOXSUPRINE (5MG/ML) AMP OF 2 ML INJ VOGLIBOSE 0.2MG TAB VOGLIBOSE 0.3MG TAB INSULIN ISOPHANE/NPH (70%) + HUMAN INSULIN/SOLUBLE INSULIN (30%) (MIXTARD 30 /70 INSULIN) INJ	1 1 1 170 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	mg mg mg ml No No No MG mg unit	1 x od	After Meal After Meal After Meal After Meal After Meal SOS After Meal After Meal LA SOS SOS WITH MEAL WITH MEAL Before Meal	E D D V V V V V V V V V V V V V V V V V
91 92 93 94 95 96 97 98 99	238 239 240 241 241 242 245 246 247 250 251 253 254 256	11622 10873 11687 11688 11710 10625 11739	DICYCLOMINE (10MG) + MEFENAMIC ACID (250MG) TAB TADALAFIL 10MG TAB EXEMESTANE 25 MG TAB CREMAFFIN (LIQUID PARAFFIN 1.25MG+MAGNESIUM HYDROXIDE 3.75MG+SODIUM PICOSULPHATE 3.3MG) 170ML SYP GLOVES FORMOTEROL (6MCG) + BUDESONIDE (400MCG) ROTACAP NORFLOXACIN (400MG) + TINIDAZOLE (600MG) TAB ORS SACHET INJ NANDROLONE DECANOATE 25MG/ML INDACATEROL (110MCG) + GLYCOPYRROLATE (50MCG) ROTACAP CLOTRIMAZOLE 100MG (VAGINAL TABLETS) POVIDONE IODINE 200 MG PESSARY ISOXSUPRINE (5MG/ML) AMP OF 2 ML INJ VOGLIBOSE 0.3MG TAB INSULIN ISOPHANE/NPH (70%) + HUMAN INSULIN/SOLUBLE INSULIN (30%) (MIXTARD 30 /70 INSULIN) INJ	1 1 1 170 1 1 1 1 1 1 1 1	mg mg mg ml No No No No No No No No MG mg	1 x od	After Meal After Meal After Meal After Meal After Meal SOS After Meal SOS After Meal LA SOS SOS WITH MEAL WITH MEAL	E D D V V V V V E E V V V
91 92 93 94 95 96 97 98 99 100 101	238 239 240 241 241 242 245 246 247 250 251 253 254 256	11622 10873 11687 11688 11710 10625 11739	DICYCLOMINE (10MG) + MEFENAMIC ACID (250MG) TAB TADALAFIL 10MG TAB EXEMESTANE 25 MG TAB CREMAFFIN (LIQUID PARAFFIN 1.25MG+MAGNESIUM HYDROXIDE 3.75MG+SODIUM PICOSULPHATE 3.3MG) 170ML SYP GLOVES FORMOTEROL (6MCG) + BUDESONIDE (400MCG) ROTACAP NORFLOXACIN (400MG) TAB ORS SACHET INJ NANDROLONE DECANOATE 25MG/ML INDACATEROL (110MCG) + GLYCOPYRROLATE (50MCG) ROTACAP CLOTRIMAZOLE 100MG (VAGINAL TABLETS) POVIDONE IODINE 200 MG PESSARY ISOXSUPRINE (5MG/ML) AMP OF 2 ML INJ VOGLIBOSE 0.2MG TAB INSULIN ISOPHANE/NPH (70%) + HUMAN INSULIN/SOLUBLE INSULIN (30%) (MIXTARD 30 /70 INSULIN ISOPHANE/NPH (50%) + HUMAN	1 1 1 170 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	mg mg mg ml No No No MG mg unit	1 x od	After Meal After Meal After Meal After Meal After Meal SOS After Meal After Meal LA SOS SOS WITH MEAL WITH MEAL Before Meal	E D D V V V V V V V V V V V V V V V V V
91 92 93 94 95 96 97 98 99 100 101	238 239 240 241 241 242 245 246 247 250 251 253 254 256	11622 10873 11687 11688 11710 10625 11739	DICYCLOMINE (10MG) + MEFENAMIC ACID (250MG) TAB TADALAFIL 10MG TAB EXEMESTANE 25 MG TAB CREMAFFIN (LIQUID PARAFFIN 1.25MG+MAGNESIUM HYDROXIDE 3.75MG+SODIUM PICOSULPHATE 3.3MG) 170ML SYP GLOVES FORMOTEROL (6MCG) + BUDESONIDE (400MCG) ROTACAP NORFLOXACIN (400MG) + TINIDAZOLE (600MG) TAB ORS SACHET INJ NANDROLONE DECANOATE 25MG/ML INDACATEROL (110MCG) + GLYCOPYRROLATE (50MCG) ROTACAP CLOTRIMAZOLE 100MG (VAGINAL TABLETS) POVIDONE IODINE 200 MG PESSARY ISOXSUPRINE (5MG/ML) AMP OF 2 ML INJ VOGLIBOSE 0.3MG TAB INSULIN ISOPHANE/NPH (70%) + HUMAN INSULIN/SOLUBLE INSULIN (30%) (MIXTARD 30 /70 INSULIN) INJ	1 1 1 170 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	mg mg mg ml No No No MG mg unit	1 x od	After Meal After Meal After Meal After Meal After Meal SOS After Meal After Meal LA SOS SOS WITH MEAL WITH MEAL Before Meal	E D D V V V V V V V V V V V V V V V V V
91 92 93 94 95 96 97 98 99 100 101	238 239 240 241 241 242 245 246 247 250 251 253 254 256	11622 10873 11687 11688 11710 10625 11739	DICYCLOMINE (10MG) + MEFENAMIC ACID (250MG) TAB TADALAFIL 10MG TAB EXEMESTANE 25 MG TAB CREMAFFIN (LIQUID PARAFFIN 1.25MG+MAGNESIUM HYDROXIDE 3.75MG+SODIUM PICOSULPHATE 3.3MG) 170ML SYP GLOVES FORMOTEROL (6MCG) + BUDESONIDE (400MCG) ROTACAP NORFLOXACIN (400MG) TAB ORS SACHET INJ NANDROLONE DECANOATE 25MG/ML INDACATEROL (110MCG) + GLYCOPYRROLATE (50MCG) ROTACAP CLOTRIMAZOLE 100MG (VAGINAL TABLETS) POVIDONE IODINE 200 MG PESSARY ISOXSUPRINE (5MG/ML) AMP OF 2 ML INJ VOGLIBOSE 0.2MG TAB INSULIN ISOPHANE/NPH (70%) + HUMAN INSULIN/SOLUBLE INSULIN (30%) (MIXTARD 30 /70 INSULIN ISOPHANE/NPH (50%) + HUMAN	1 1 1 170 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	mg mg mg ml No No No MG mg unit	1 x od	After Meal After Meal After Meal After Meal After Meal SOS After Meal After Meal LA SOS SOS WITH MEAL WITH MEAL Before Meal	E D D V V V V V V V V V V V V V V V V V

104	264	12808	INSULIN DEGLUDEC (2.56MG)	300	Unit	10 unit x od	Before Meal	٧
			+ INSULIN ASPART (1.05MG)					
105	270	11787	INSULIN PROPYL THIOURACIL 50MG	1	MG	1 x od	After Meal	V
			TAB	-	0	1 2 0 0	74101 111041	•
106	271	11788	CARBIMAZOLE 5MG TAB	1	mg	1 x od	after dinner	
107	278	10888	SORAFENIB 200 MG TAB	1	MG	1 x od	After Meal	D
108	281		SOFT CERVICAL COLLAR SIZE-	1	No	sos	sos	D
109	289	12003	BETAXOLOL (0.5% W/V) ED	5	ml	1 Drop twice a day	LA	D
			BOTT OF 5 ML					
110	293	12071	DORZOLAMIDE (2 %W/V) +	5	ml	1 Drop twice a day	LA	٧
111	295	12050	TIMOLOL (0.5 %W/V) ED SULPHACETAMIDE (20% W/V)	5	ml	1 Drop twice a day	LA	Е
	233	12030	EYE DROPS	J		1 Diop twice a day		_
112	297	12066	BIMATOPROST-0.03%W/V EYE	5	ml	1 Drop twice a day	LA	٧
113	300	12115	DROPS CINNARIZINE 25MG	1		4 v od	After Meel	Е
113	300	12115	TAB(STUGERON)	1	mg	1 x od	After Meal	_
114	305		SALINE NASAL DROPS	5	ml	1 Drop twice a day	LA	٧
115	308		DABIGATRAN 75 MG TAB	1	mg	1 x od	After Meal	V
116	309	12493	BROMHEXINE (2MG) +	100	ml	1 tsp x od	After Meal	V
			GUAIFENESIN (50MG) +					
			MENTHOL (1MG) +					
			TERBUTALINE (1.25MG) SYRUP					
117	311	11196	VALSARTAN 40 MG TAB	1	mg	1 x od	After Meal	D
118	313	12246	SYP SALBUTAMOL 100ML	100	ml	1 tsp x od	After Meal	
119	322	12052	LULICONAZOLE CREAM	15	gm	Local apply once a	LA	D
					J	day		
120	324	12332	MIRTAZAPINE 15 MG TAB	1	mg	1 x od	After Meal	D
121	328	12453	LEVOSALBUTAMOL (50MCG) +	10	puff	1 Puff x OD	LA	٧
			BECLOMETASONE (50MCG)					
122	337		INHALER HEPARIN 15G/ 20G OINT	20	am	Local apply once a	LA	D
122	331		HEPARIN 199/ 209 OINT	20	gm	dav	LA	U
123	340	11504	CILNIDIPINE 5 MG TAB	1	mg	1 x od	After Meal	٧
124	341	12682	TERAZOSIN 2 MG TAB	1	mg	1 x od	After Meal	Е
125	344	12686	TAMSULOSIN 0.4 MG TAB	1	mg	1 x hs	After Meal	V
126	351	12741	(URIMAX) VITAMIN E (EVION) 200MG CAP	1	ma	1 x hs	After Meal	D
120	331	12741	VITAMIN E (EVION) 200MG CAP	'	mg	1 X 115	Aitei Weai	
127	353	13903	CRIZOTINIB 250 MG TAB	1	mg	1 x od	After Meal	D
128	358	12922	FEXOFENADINE 120MG TAB	1	mg	1 x od	After Meal	Е
129		11762	GLIMEPRIDE 1MGTAB	1	mg	1x hs	After Meal	V
130	359	11763	GLIMEPIRIDE 2MG TAB	1	mg	1 x hs	Before Meal	V
131	361	12926	HYDROXYCHLOROQUINE 200	1	mg	1 x od	After Meal	V
132	362	12944	MG (HCQ) TAB LEFLUNOMIDE (ARAVA) 20	1	mg	1 x od	After Meal	V
.02	***		MG TAB	•	9	1200	74401 111041	•
133	363	12946	LEFLUNOMIDE (ARAVA) 10	1	mg	1 x od	After Meal	V
424	200		MG TAB					
134 135	366 367			4	PA 61	4 4 64	After Meet	W
136	30/	11020	ATORVASTATIN 40MG TAB	1	mg	1 x od	After Meal	V
100		11029	ACENOCOUMAROL 1 MG TAB	1	mg	1 x od	After Meal	
	370	11029	ACENOCOUMAROL 1 MG TAB FORMOTEROL (6MCG) +					V
		11029	ACENOCOUMAROL 1 MG TAB FORMOTEROL (6MCG) + BUDESONIDE (100MCG)	1	mg	1 x od	After Meal	
137	370 371	11029	ACENOCOUMAROL 1 MG TAB FORMOTEROL (6MCG) + BUDESONIDE (100MCG) ROTACAP CAPECITABINE 500MG TAB	1	mg	1 x od 1 x od	After Meal After Meal After Meal	V
137 138	370 371 373	10806	ACENOCOUMAROL 1 MG TAB FORMOTEROL (6MCG) + BUDESONIDE (100MCG) ROTACAP CAPECITABINE 500MG TAB AMIODARONE 100 MG TAB	1 1 1	mg No mg	1 x od 1 x od 1 x od 1 x od 1 x od	After Meal After Meal After Meal After Meal	V D V
137 138 139	370 371 373 378	10806	ACENOCOUMAROL 1 MG TAB FORMOTEROL (6MCG) + BUDESONIDE (100MCG) ROTACAP CAPECITABINE 500MG TAB AMIODARONE 100 MG TAB ANASTRAZOLE 1 MG TAB	1 1 1 1	mg No mg mg	1 x od 1 x od 1 x od 1 x od 1 x od 1 x od	After Meal After Meal After Meal After Meal After Meal After Meal	V D V D
137 138 139 140	370 371 373 378 382	10806	ACENOCOUMAROL 1 MG TAB FORMOTEROL (6MCG) + BUDESONIDE (100MCG) ROTACAP CAPECITABINE 500MG TAB AMIODARONE 100 MG TAB ANASTRAZOLE 1 MG TAB ITOPRIDE 50 MG TAB	1 1 1 1 1 1	mg No mg mg mg mg mg mg	1 x od 1 x od 1 x od 1 x od 1 x od 1 x od	After Meal	V D D E
137 138 139 140 141	370 371 373 378 382 388	10806	ACENOCOUMAROL 1 MG TAB FORMOTEROL (6MCG) + BUDESONIDE (100MCG) ROTACAP CAPECITABINE 500MG TAB AMIODARONE 100 MG TAB ANASTRAZOLE 1 MG TAB ITOPRIDE 50 MG TAB BETADINE MOUTHWASH	1 1 1 1 1 1 100	mg No mg mg mg mg mg mg ml	1 x od 1 x od 1 x od 1 x od 1 x od 1 x od 1 tsp x od	After Meal	V D D E D D
137 138 139 140 141 142	370 371 373 378 382 388 389	10806 10879 10628	ACENOCOUMAROL 1 MG TAB FORMOTEROL (6MCG) + BUDESONIDE (100MCG) ROTACAP CAPECITABINE 500MG TAB AMIODARONE 100 MG TAB ANASTRAZOLE 1 MG TAB ITOPRIDE 50 MG TAB BETADINE MOUTHWASH RACECADOTRIL 100MG CAP	1 1 1 1 1 1 100	mg No mg mg mg mg mg mg mg mg	1 x od 1 x od 1 x od 1 x od 1 x od 1 x od 1 tsp x od 1 x od	After Meal anytime	V D C E D E E
137 138 139 140 141	370 371 373 378 382 388	10806	ACENOCOUMAROL 1 MG TAB FORMOTEROL (6MCG) + BUDESONIDE (100MCG) ROTACAP CAPECITABINE 500MG TAB AMIODARONE 100 MG TAB ANASTRAZOLE 1 MG TAB ITOPRIDE 50 MG TAB BETADINE MOUTHWASH	1 1 1 1 1 1 100	mg No mg mg mg mg mg mg ml	1 x od 1 x od 1 x od 1 x od 1 x od 1 x od 1 tsp x od	After Meal	V D D E D D
137 138 139 140 141 142	370 371 373 378 382 388 389	10806 10879 10628	ACENOCOUMAROL 1 MG TAB FORMOTEROL (6MCG) + BUDESONIDE (100MCG) ROTACAP CAPECITABINE 500MG TAB AMIODARONE 100 MG TAB ANASTRAZOLE 1 MG TAB ITOPRIDE 50 MG TAB BETADINE MOUTHWASH RACECADOTRIL 100MG CAP BUDESONIDE (0.5MG)	1 1 1 1 1 1 100	mg No mg mg mg mg mg mg mg mg	1 x od 1 x od 1 x od 1 x od 1 x od 1 x od 1 tsp x od 1 x od	After Meal anytime	V D C E D E E
137 138 139 140 141 142 143	370 371 373 378 382 388 389 391 392	10806 10879 10628 12814 12481	ACENOCOUMAROL 1 MG TAB FORMOTEROL (6MCG) + BUDESONIDE (100MCG) ROTACAP CAPECITABINE 500MG TAB AMIODARONE 100 MG TAB ITOPRIDE 50 MG TAB BETADINE MOUTHWASH RACECADOTRIL 100MG CAP BUDESONIDE (0.5MG) RESPULES BUDESONIDE 200MCG ROTACAP	1 1 1 1 1 1 100 1	mg No mg	1 x od 1 tsp x od 1 x od 1 x od 1 x od	After Meal anytime anytime anytime	V D V D E V V V
137 138 139 140 141 142 143	370 371 373 378 382 388 389 391	10806 10879 10628	ACENOCOUMAROL 1 MG TAB FORMOTEROL (6MCG) + BUDESONIDE (100MCG) ROTACAP CAPECITABINE 500MG TAB AMIODARONE 100 MG TAB ITOPRIDE 50 MG TAB BETADINE MOUTHWASH RACECADOTRIL 100MG CAP BUDESONIDE (0.5MG) RESPULES BUDESONIDE 200MCG ROTACAP CIPROFLOXACIN (500MG) +	1 1 1 1 1 1 100 1	mg No mg	1 x od 1 x od 1 x od 1 x od 1 x od 1 x od 1 tsp x od 1 x od 1 x od	After Meal anytime anytime	V D E D V
137 138 139 140 141 142 143 144	370 371 373 378 382 388 389 391 392 398	10806 10879 10628 12814 12481	ACENOCOUMAROL 1 MG TAB FORMOTEROL (6MCG) + BUDESONIDE (100MCG) ROTACAP CAPECITABINE 500MG TAB AMIODARONE 100 MG TAB ITOPRIDE 50 MG TAB BETADINE MOUTHWASH RACECADOTRIL 100MG CAP BUDESONIDE (0.5MG) RESPULES BUDESONIDE 200MCG ROTACAP CIPROFLOXACIN (500MG) + TINIDAZOLE (600MG) TAB	1 1 1 1 1 1 100 1 1	mg No mg	1 x od 1 x od 1 x od 1 x od 1 x od 1 x od 1 tsp x od 1 x od 1 x od 1 x od 1 x od 1 x od	After Meal anytime anytime After Meal	V D V D E D V V V E
137 138 139 140 141 142 143 144 145	370 371 373 378 382 388 389 391 392 398 403	10806 10879 10628 12814 12481	ACENOCOUMAROL 1 MG TAB FORMOTEROL (6MCG) + BUDESONIDE (100MCG) ROTACAP CAPECITABINE 500MG TAB AMIODARONE 100 MG TAB ITOPRIDE 50 MG TAB BETADINE MOUTHWASH RACECADOTRIL 100MG CAP BUDESONIDE (0.5MG) RESPULES BUDESONIDE 200MCG ROTACAP CIPROFLOXACIN (500MG) + TINIDAZOLE (600MG) TAB COLOPLAST PASTE 2650	1 1 1 1 1 1 100 1 1 1	mg No mg Mo	1 x od 1 x od 1 x od 1 x od 1 x od 1 x od 1 tsp x od 1	After Meal anytime anytime After Meal SOS	V D V D E V V V
137 138 139 140 141 142 143 144 145	370 371 373 378 382 388 389 391 392 398 403 404	10806 10879 10628 12814 12481	ACENOCOUMAROL 1 MG TAB FORMOTEROL (6MCG) + BUDESONIDE (100MCG) ROTACAP CAPECITABINE 500MG TAB AMIODARONE 100 MG TAB ITOPRIDE 50 MG TAB BETADINE MOUTHWASH RACECADOTRIL 100MG CAP BUDESONIDE (0.5MG) RESPULES BUDESONIDE 200MCG ROTACAP CIPROFLOXACIN (500MG) + TINIDAZOLE (600MG) TAB COLOPLAST PASTE 2650 COLOSTOMY BAG 1692	1 1 1 1 1 1 100 1 1	mg No mg mg mg mg mg mg mg mg mg No No	1 x od 1 tsp x od 1 x od 5 x od 1 x od 5 x od	After Meal anytime anytime After Meal SOS SOS	V D V D E D V V V E D D
137 138 139 140 141 142 143 144 145	370 371 373 378 382 388 389 391 392 398 403	10806 10879 10628 12814 12481	ACENOCOUMAROL 1 MG TAB FORMOTEROL (6MCG) + BUDESONIDE (100MCG) ROTACAP CAPECITABINE 500MG TAB AMIODARONE 100 MG TAB ITOPRIDE 50 MG TAB BETADINE MOUTHWASH RACECADOTRIL 100MG CAP BUDESONIDE (0.5MG) RESPULES BUDESONIDE 200MCG ROTACAP CIPROFLOXACIN (500MG) + TINIDAZOLE (600MG) TAB COLOPLAST PASTE 2650	1 1 1 1 1 100 1 1 1 1	mg No mg Mo	1 x od 1 x od 1 x od 1 x od 1 x od 1 x od 1 tsp x od 1	After Meal anytime anytime After Meal SOS	V D V D E D V V V E
137 138 139 140 141 142 143 144 145 146 147 148	370 371 373 378 382 388 389 391 392 398 403 404 405 406 409	10806 10879 10628 12814 12481	ACENOCOUMAROL 1 MG TAB FORMOTEROL (6MCG) + BUDESONIDE (100MCG) ROTACAP CAPECITABINE 500MG TAB AMIODARONE 100 MG TAB ANASTRAZOLE 1 MG TAB ITOPRIDE 50 MG TAB BETADINE MOUTHWASH RACECADOTRIL 100MG CAP BUDESONIDE (0.5MG) RESPULES BUDESONIDE 200MCG ROTACAP CIPROFLOXACIN (500MG) + TINIDAZOLE (600MG) TAB COLOPLAST PASTE 2650 COLOSTOMY BAG 1692 COLOSTOMY BAG 6562	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	mg No mg mg mg mg mg mg mg mg No No No	1 x od 5 x od 1 x od 5	After Meal anytime anytime anytime After Meal SOS SOS SOS	V D V D E D V V V D D D D D D D D D D D
137 138 139 140 141 142 143 144 145 146 147 148 149 150 151	370 371 373 378 382 388 389 391 392 398 403 404 405 406 409 410	10806 10879 10628 12814 12481 10650	ACENOCOUMAROL 1 MG TAB FORMOTEROL (6MCG) + BUDESONIDE (100MCG) ROTACAP CAPECITABINE 500MG TAB AMIODARONE 100 MG TAB ITOPRIDE 50 MG TAB BETADINE MOUTHWASH RACECADOTRIL 100MG CAP BUDESONIDE (0.5MG) RESPULES BUDESONIDE 200MCG ROTACAP CIPROFLOXACIN (500MG) + TINIDAZOLE (600MG) TAB COLOPLAST PASTE 2650 COLOSTOMY BAG 6562 URO BASE PLATE 2002 BISOPROLOL 5MG TAB CORN CAP	1 1 1 1 1 100 1 1 1 1 1 1 1 1 1 1 1 1 1	mg No mg mg mg mg mg mg mg mg Mo No No No No No No No	1 x od	After Meal anytime anytime After Meal SOS SOS SOS SOS After Meal LA	V D V D E D V V V D E D D D D E D D D D
137 138 139 140 141 142 143 144 145 146 147 148 149 150 151 151	370 371 373 378 382 388 389 391 392 398 403 404 405 406 409 410 415	10806 10879 10628 12814 12481 10650	ACENOCOUMAROL 1 MG TAB FORMOTEROL (6MCG) + BUDESONIDE (100MCG) ROTACAP CAPECITABINE 500MG TAB AMIODARONE 100 MG TAB ITOPRIDE 50 MG TAB BETADINE MOUTHWASH RACECADOTRIL 100MG CAP BUDESONIDE (0.5MG) RESPULES BUDESONIDE 200MCG ROTACAP CIPROFLOXACIN (500MG) + TINIDAZOLE (600MG) TAB COLOPLAST PASTE 2650 COLOSTOMY BAG 1692 URO BASE PLATE 2002 BISOPROLOL 5MG TAB CORN CAP DULOXETINE 20MG CAP	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	mg mg mg mg mg mg mg mg mg Mo No No No No No mg	1 x od	After Meal anytime anytime After Meal SOS SOS SOS SOS After Meal LA After Meal	V D V D E D V V D E D D E V V E D D D D
137 138 139 140 141 142 143 144 145 146 147 148 149 150 151	370 371 373 378 382 388 389 391 392 398 403 404 405 406 409 410	10806 10879 10628 12814 12481 10650	ACENOCOUMAROL 1 MG TAB FORMOTEROL (6MCG) + BUDESONIDE (100MCG) ROTACAP CAPECITABINE 500MG TAB AMIODARONE 100 MG TAB ANASTRAZOLE 1 MG TAB ITOPRIDE 50 MG TAB BETADINE MOUTHWASH RACECADOTRIL 100MG CAP BUDESONIDE (0.5MG) RESPULES BUDESONIDE 200MCG ROTACAP CIPROFLOXACIN (500MG) + TINIDAZOLE (600MG) TAB COLOPLAST PASTE 2650 COLOSTOMY BAG 1692 COLOSTOMY BAG 6562 URO BASE PLATE 2002 BISOPROLOL 5MG TAB CORN CAP DULOXETINE 20MG CAP LEVOSALBUTAMOL (100MCG)	1 1 1 1 1 100 1 1 1 1 1 1 1 1 1 1 1 1 1	mg No mg mg mg mg mg mg mg mg Mo No No No No No No No	1 x od	After Meal anytime anytime After Meal SOS SOS SOS SOS After Meal LA	V D V D E D V V V D E D D D D E D D D D
137 138 139 140 141 142 143 144 145 146 147 148 149 150 151 151	370 371 373 378 382 388 389 391 392 398 403 404 405 406 409 410 415	10806 10879 10628 12814 12481 10650	ACENOCOUMAROL 1 MG TAB FORMOTEROL (6MCG) + BUDESONIDE (100MCG) ROTACAP CAPECITABINE 500MG TAB AMIODARONE 100 MG TAB ANASTRAZOLE 1 MG TAB ITOPRIDE 50 MG TAB BETADINE MOUTHWASH RACECADOTRIL 100MG CAP BUDESONIDE (0.5MG) RESPULES BUDESONIDE 200MCG ROTACAP CIPROFLOXACIN (500MG) + TINIDAZOLE (600MG) TAB COLOPLAST PASTE 2650 COLOSTOMY BAG 1692 COLOSTOMY BAG 6562 URO BASE PLATE 2002 BISOPROLOL 5MG TAB CORN CAP DULOXETINE 20MG CAP LEVOSALBUTAMOL (100MCG) + IPRATROPIUM (40MCG)	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	mg mg mg mg mg mg mg mg mg Mo No No No No No mg	1 x od	After Meal anytime anytime After Meal SOS SOS SOS SOS After Meal LA After Meal	V D V D E D V V D E D D E V V E D D D D
137 138 139 140 141 142 143 144 145 146 147 148 149 150 151 151	370 371 373 378 382 388 389 391 392 398 403 404 405 406 409 410 415	10806 10879 10628 12814 12481 10650	ACENOCOUMAROL 1 MG TAB FORMOTEROL (6MCG) + BUDESONIDE (100MCG) ROTACAP CAPECITABINE 500MG TAB AMIODARONE 100 MG TAB ANASTRAZOLE 1 MG TAB ITOPRIDE 50 MG TAB BETADINE MOUTHWASH RACECADOTRIL 100MG CAP BUDESONIDE (0.5MG) RESPULES BUDESONIDE 200MCG ROTACAP CIPROFLOXACIN (500MG) + TINIDAZOLE (600MG) TAB COLOPLAST PASTE 2650 COLOSTOMY BAG 1692 URO BASE PLATE 2002 BISOPROLOL 5MG TAB CORN CAP DULOXETINE 20MG CAP LEVOSALBUTAMOL (100MCG) + IPRATROPIUM (40MCG) ROTACAP	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	mg mg mg mg mg mg mg mg mg Mo No No No No No mg	1 x od	After Meal anytime anytime After Meal SOS SOS SOS SOS SOS After Meal LA After Meal anytime	V D V D E D V V D E D D E V V E D D D D
137 138 139 140 141 142 143 144 145 146 147 148 149 150 151 152	370 371 373 378 382 388 389 391 392 398 403 404 405 406 409 410 415 418	10806 10879 10628 12814 12481 10650 11202 12316	ACENOCOUMAROL 1 MG TAB FORMOTEROL (6MCG) + BUDESONIDE (100MCG) ROTACAP CAPECITABINE 500MG TAB AMIODARONE 100 MG TAB ANASTRAZOLE 1 MG TAB ITOPRIDE 50 MG TAB BETADINE MOUTHWASH RACECADOTRIL 100MG CAP BUDESONIDE (0.5MG) RESPULES BUDESONIDE 200MCG ROTACAP CIPROFLOXACIN (500MG) + TINIDAZOLE (600MG) TAB COLOPLAST PASTE 2650 COLOSTOMY BAG 1692 COLOSTOMY BAG 6562 URO BASE PLATE 2002 BISOPROLOL 5MG TAB CORN CAP DULOXETINE 20MG CAP LEVOSALBUTAMOL (100MCG) + IPRATROPIUM (40MCG)	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	mg No mg No No No No No No No Mo No No No No	1 x od 1 tsp x od 1 x od	After Meal anytime anytime After Meal SOS SOS SOS SOS After Meal LA After Meal	V D V D E D C V V D E D D E V V V E D D D D E E V V V V
137 138 139 140 141 142 143 144 145 146 147 148 149 150 151 152	370 371 373 378 382 388 389 391 392 398 403 404 405 406 409 410 415 418	10806 10879 10628 12814 12481 10650 11202 12316	ACENOCOUMAROL 1 MG TAB FORMOTEROL (6MCG) + BUDESONIDE (100MCG) ROTACAP CAPECITABINE 500MG TAB AMIODARONE 100 MG TAB ITOPRIDE 50 MG TAB BETADINE MOUTHWASH RACECADOTRIL 100MG CAP BUDESONIDE (0.5MG) RESPULES BUDESONIDE 200MCG ROTACAP CIPROFLOXACIN (500MG) + TINIDAZOLE (600MG) TAB COLOPLAST PASTE 2650 COLOSTOMY BAG 1692 COLOSTOMY BAG 6562 URO BASE PLATE 2002 BISOPROLOL 5MG TAB CORN CAP DULOXETINE 20MG CAP LEVOSALBUTAMOL (100MCG) + IPRATROPIUM (40MCG) ROTACAP LEVOSALBUTAMOL (1.25MG)	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	mg No mg No No No No No No No Mo No No No No	1 x od 1 tsp x od 1 x od	After Meal anytime anytime After Meal SOS SOS SOS SOS SOS After Meal LA After Meal anytime	V D V D E D C V V D E D D E V V V E D D D D E E V V V V

_						1		
155	422		TORASEMIDE 20MG TAB	1	mg	1 x od	After Meal	V
156	423		TORASEMIDE 10MG TAB	1	mg	1 x od	After Meal	E
157	424		ED BORIC ACID	5	ml	1 Drop twice a day	LA	D
158	425	12020	BRIMONIDINE (0.2% W/V) EYE	5	ml	1 Drop twice a day	LA	Е
159	424	12318	DROPS	1		4 v od	After Meal	V
	431	12310	ESCITALOPRAM 10MG TAB		mg	1 x od		
160	432		ESCITALOPRAM 20MG TAB	1	mg	1 x od	After Meal	Е
161	433	12951	ETORICOXCIB 90MG TAB	1	mg	1 x od	After Meal	E
162	440		FORMOTEROL (6MCG) +	1	No	1 x od	LA	V
			BUDESONIDE (100MCG) RESPICAP					
163	441		FORMOTEROL (6MCG) + BUDESONIDE (200MCG) RC	1	No	1 x od	LA	Е
164	442	12835	FORMOTEROL (6MCG) + BUDESONIDE (400MCG)	10	puff	1 Puff x OD	LA	E
165	443		INHALÈR	1	No	4 v ad	LA	E
			FORMOTEROL (6MCG) + BUDESONIDE (400MCG) RC			1 x od		
166	447		GLUCOMETER STRIPS ONE TOUCH ULTRA	1	No	sos	sos	٧
167	449		GLUCOMETER STRIPS ONE TOUCH SELECT	1	No	sos	sos	Е
168	451		IBANDRONIC ACID (6MG) INJ	1	mg	1 x od	After Meal	D
			(BONDRONAT)					
169	456	11010	RECOMBINANT HUMAN ERYTHROPOIETIN ALFA 10000	1	No	1 x weekly	After Meal	V
470	457	11011	IU INJ	- 4	NI.	4 ye was alder	A Ston Bills - I	-
170	457	11011	RECOMBINANT HUMAN ERYTHROPOIETIN ALFA	1	No	1 x weekly	After Meal	E
171	462	12718	20000IU INJ INJ METHYLCOBALAMIN	1	No	1 x od	After Meal	D
171	462	12/18		1	NO	1 x 00	After Meal	D
			(1000MCG) + VITAMIN B6					
			(PYRIDOXINE) (100MG) +					
			NICOTINAMIDE (100MG)					
			(NEUROBION)					
172	463		INSULIN ISOPHANE/NPH (70%)	300	Unit	10 unit x od	Before Meal	٧
			+ HUMAN INSULIN/SOLUBLE					
			INSULIN (30%) (HUMAN					
			MIXTARD 70/30) INJ					
173	465	10845	INJ INFLIXIMAB 100IU	1	NO	1 x od	After Meal	D
173	403	10045	(REMICADE)		NO	1 X Ou	Aitei weai	
174		11964	CALCIUM POLYSTYRENE	1	No	sos	After Meal	D
174		1 11304	CALCIUM FOLISTIKENE					U
			SULPHONATE SACHET -K-BIND		110	303		
175	471	11082		1				V
175	471	11082	FENOFIBRATE 160MG TAB	11	mg	1 x od	After Meal	V
176	477	11082 11708	FENOFIBRATE 160MG TAB METFORMIN SR 1000 MG TAB	1	mg mg	1 x od 1 x od	After Meal After Meal	٧
176 177	477 478	11708	FENOFIBRATE 160MG TAB METFORMIN SR 1000 MG TAB METOPROLOL SR 25 MG TAB	1	mg mg mg	1 x od 1 x od 1 x od	After Meal After Meal After Meal	V V
176	477		FENOFIBRATE 160MG TAB METFORMIN SR 1000 MG TAB	1	mg mg	1 x od 1 x od	After Meal After Meal	٧
176 177	477 478	11708	FENOFIBRATE 160MG TAB METFORMIN SR 1000 MG TAB METOPROLOL SR 25 MG TAB	1	mg mg mg	1 x od 1 x od 1 x od	After Meal After Meal After Meal	V V
176 177 178 179	477 478 479 480	11708	FENOFIBRATE 160MG TAB METFORMIN SR 1000 MG TAB METOPROLOL SR 25 MG TAB METOPROLOL SR 50 MG TAB MOXONIDINE 0.3MG TAB	1 1 1	mg mg mg mg	1 x od 1 x od 1 x od 1 x od 1 x od 1 x od	After Meal After Meal After Meal After Meal After Meal After Meal	V V E E
176 177 178	477 478 479	11708	FENOFIBRATE 160MG TAB METFORMIN SR 1000 MG TAB METOPROLOL SR 25 MG TAB METOPROLOL SR 50 MG TAB	1 1 1	mg mg mg	1 x od 1 x od 1 x od 1 x od 1 x od	After Meal After Meal After Meal After Meal After Meal	V V E
176 177 178 179 180 181	477 478 479 480 481 495	11708 11177 11047 10536	FENOFIBRATE 160MG TAB METFORMIN SR 1000 MG TAB METOPROLOL SR 25 MG TAB METOPROLOL SR 50 MG TAB MOXONIDINE 0.3MG TAB LENVATINIB 4MG TAB OXCARBAZEPINE 150 MG TAB	1 1 1 1 1	mg mg mg mg mg mg	1 x od 1 x od	After Meal	V V E E E
176 177 178 179 180 181	477 478 479 480 481 495	11708 11177 11047 10536 12683	FENOFIBRATE 160MG TAB METFORMIN SR 1000 MG TAB METOPROLOL SR 25 MG TAB METOPROLOL SR 50 MG TAB MOXONIDINE 0.3MG TAB LENVATINIB 4MG TAB OXCARBAZEPINE 150 MG TAB OXYBUTYNIN 2.5 MG TAB	1 1 1 1 1 1	mg mg mg mg mg mg	1 x od 1 x od	After Meal	V V E E E
176 177 178 179 180 181 182 183	477 478 479 480 481 495 496 501	11708 11177 11047 10536	FENOFIBRATE 160MG TAB METFORMIN SR 1000 MG TAB METOPROLOL SR 25 MG TAB METOPROLOL SR 50 MG TAB MOXONIDINE 0.3MG TAB LENVATINIB 4MG TAB OXCARBAZEPINE 150 MG TAB OXYBUTYNIN 2.5 MG TAB PRAMIPEXOLE 0.25MG TAB	1 1 1 1 1 1 1 1 1 1	mg mg mg mg mg mg	1 x od 1 x od	After Meal	V V E E E E
176 177 178 179 180 181	477 478 479 480 481 495	11708 11177 11047 10536 12683	FENOFIBRATE 160MG TAB METFORMIN SR 1000 MG TAB METOPROLOL SR 25 MG TAB METOPROLOL SR 50 MG TAB MOXONIDINE 0.3MG TAB LENVATINIB 4MG TAB OXCARBAZEPINE 150 MG TAB OXYBUTYNIN 2.5 MG TAB PRAMIPEXOLE 0.25MG TAB LEVOSULPIRIDE (75MG) +	1 1 1 1 1 1	mg mg mg mg mg mg	1 x od 1 x od	After Meal	V V E E E
176 177 178 179 180 181 182 183 184	477 478 479 480 481 495 496 501 507	11708 11177 11047 10536 12683	FENOFIBRATE 160MG TAB METFORMIN SR 1000 MG TAB METOPROLOL SR 25 MG TAB METOPROLOL SR 50 MG TAB MOXONIDINE 0.3MG TAB LENVATINIB 4MG TAB OXCARBAZEPINE 150 MG TAB OXYBUTYNIN 2.5 MG TAB PRAMIPEXOLE 0.25MG TAB LEVOSULPIRIDE (75MG) + ESOMEPRAZOLE (40MG) CAP	1 1 1 1 1 1 1 1	mg mg mg mg mg mg mg	1 x od 1 x od	After Meal	V V E E E E
176 177 178 179 180 181 182 183 184	477 478 479 480 481 495 496 501 507	11708 11177 11047 10536 12683	FENOFIBRATE 160MG TAB METFORMIN SR 1000 MG TAB METOPROLOL SR 25 MG TAB METOPROLOL SR 50 MG TAB MOXONIDINE 0.3MG TAB LENVATINIB 4MG TAB OXCARBAZEPINE 150 MG TAB OXYBUTYNIN 2.5 MG TAB PRAMIPEXOLE 0.25MG TAB LEVOSULPIRIDE (75MG) + ESOMEPRAZOLE (40MG) CAP ROPINIROLE 1MG TAB	1 1 1 1 1 1 1 1	mg mg mg mg mg mg mg	1 x od 1 x od	After Meal	V V E E E E
176 177 178 179 180 181 182 183 184 185	477 478 479 480 481 495 496 501 507	11708 11177 11047 10536 12683 10506	FENOFIBRATE 160MG TAB METFORMIN SR 1000 MG TAB METOPROLOL SR 25 MG TAB METOPROLOL SR 50 MG TAB MOXONIDINE 0.3MG TAB LENVATINIB 4MG TAB OXCARBAZEPINE 150 MG TAB OXYBUTYNIN 2.5 MG TAB PRAMIPEXOLE 0.25MG TAB LEVOSULPIRIDE (75MG) + ESOMEPRAZOLE (40MG) CAP ROPINIROLE 1MG TAB S AMLODEPINE 5 MG TAB	1 1 1 1 1 1 1 1 1 1 1 1 1	mg mg mg mg mg mg mg mg	1 x od 1 x od	After Meal	V V E E E E E
176 177 178 179 180 181 182 183 184	477 478 479 480 481 495 496 501 507	11708 11177 11047 10536 12683	FENOFIBRATE 160MG TAB METFORMIN SR 1000 MG TAB METOPROLOL SR 25 MG TAB METOPROLOL SR 50 MG TAB MOXONIDINE 0.3MG TAB LENVATINIB 4MG TAB OXCARBAZEPINE 150 MG TAB OXYBUTYNIN 2.5 MG TAB PRAMIPEXOLE 0.25MG TAB LEVOSULPIRIDE (75MG) + ESOMEPRAZOLE (40MG) CAP ROPINIROLE 1MG TAB	1 1 1 1 1 1 1 1	mg mg mg mg mg mg mg	1 x od 1 x od	After Meal	V V E E E E
176 177 178 179 180 181 182 183 184 185	477 478 479 480 481 495 496 501 507	11708 11177 11047 10536 12683 10506	FENOFIBRATE 160MG TAB METFORMIN SR 1000 MG TAB METOPROLOL SR 25 MG TAB METOPROLOL SR 50 MG TAB MOXONIDINE 0.3MG TAB LENVATINIB 4MG TAB OXCARBAZEPINE 150 MG TAB OXYBUTYNIN 2.5 MG TAB PRAMIPEXOLE 0.25MG TAB LEVOSULPIRIDE (75MG) + ESOMEPRAZOLE (40MG) CAP ROPINIROLE 1MG TAB S AMLODEPINE 5 MG TAB	1 1 1 1 1 1 1 1 1 1 1 1 1	mg mg mg mg mg mg mg mg	1 x od 1 x od	After Meal	V V E E E E E
176 177 178 179 180 181 182 183 184 185	477 478 479 480 481 495 496 501 507	11708 11177 11047 10536 12683 10506	FENOFIBRATE 160MG TAB METFORMIN SR 1000 MG TAB METOPROLOL SR 25 MG TAB METOPROLOL SR 50 MG TAB MOXONIDINE 0.3MG TAB LENVATINIB 4MG TAB OXCARBAZEPINE 150 MG TAB OXYBUTYNIN 2.5 MG TAB PRAMIPEXOLE 0.25MG TAB LEVOSULPIRIDE (75MG) + ESOMEPRAZOLE (40MG) CAP ROPINIROLE 1MG TAB S AMLODEPINE 5 MG TAB SALMETEROL (50MCG) + FLUTICASONE PROPIONATE	1 1 1 1 1 1 1 1 1 1 1 1 1	mg mg mg mg mg mg mg mg	1 x od 1 x od	After Meal	V V E E E E E
176 177 178 179 180 181 182 183 184 185	477 478 479 480 481 495 496 501 507	11708 11177 11047 10536 12683 10506	FENOFIBRATE 160MG TAB METFORMIN SR 1000 MG TAB METOPROLOL SR 25 MG TAB METOPROLOL SR 50 MG TAB MOXONIDINE 0.3MG TAB LENVATINIB 4MG TAB OXCARBAZEPINE 150 MG TAB OXCARBAZEPINE 150 MG TAB PRAMIPEXOLE 0.25MG TAB LEVOSULPIRIDE (75MG) + ESOMEPRAZOLE (40MG) CAP ROPINIROLE 1MG TAB S AMLODEPINE 5 MG TAB SALMETEROL (50MCG) + FLUTICASONE PROPIONATE (250MCG) [SERETIDE	1 1 1 1 1 1 1 1 1 1 1 1 1	mg mg mg mg mg mg mg mg	1 x od 1 x od	After Meal	V V E E E E E
176 177 178 179 180 181 182 183 184 185	477 478 479 480 481 495 496 501 507	11708 11177 11047 10536 12683 10506	FENOFIBRATE 160MG TAB METFORMIN SR 1000 MG TAB METOPROLOL SR 25 MG TAB METOPROLOL SR 50 MG TAB MOXONIDINE 0.3MG TAB LENVATINIB 4MG TAB OXCARBAZEPINE 150 MG TAB OXYBUTYNIN 2.5 MG TAB PRAMIPEXOLE 0.25MG TAB LEVOSULPIRIDE (75MG) + ESOMEPRAZOLE (40MG) CAP ROPINIROLE 1MG TAB S AMLODEPINE 5 MG TAB SALMETEROL (50MCG) + FLUTICASONE PROPIONATE	1 1 1 1 1 1 1 1 1 1 1 1 1	mg mg mg mg mg mg mg mg	1 x od 1 x od	After Meal	V V E E E E E
176 177 178 179 180 181 182 183 184 185 186 187	477 478 479 480 481 495 496 501 507 514 516 517	11177 11047 10536 12683 10506	FENOFIBRATE 160MG TAB METFORMIN SR 1000 MG TAB METOPROLOL SR 25 MG TAB METOPROLOL SR 50 MG TAB MOXONIDINE 0.3MG TAB LENVATINIB 4MG TAB OXCARBAZEPINE 150 MG TAB OXYBUTYNIN 2.5 MG TAB PRAMIPEXOLE 0.25MG TAB LEVOSULPIRIDE (75MG) + ESOMEPRAZOLE (40MG) CAP ROPINIROLE 1MG TAB S AMLODEPINE 5 MG TAB SALMETEROL (50MCG) + FLUTICASONE PROPIONATE (250MCG) [SERETIDE ACCUMALER 50/2501	1 1 1 1 1 1 1 1 1 1 1	mg mg mg mg mg mg mg mg mg	1 x od 1 x od	After Meal	V E E E E E V V
176 177 178 179 180 181 182 183 184 185 186 187	477 478 479 480 481 495 496 501 507 514 516 517	11708 11177 11047 10536 12683 10506	FENOFIBRATE 160MG TAB METFORMIN SR 1000 MG TAB METOPROLOL SR 25 MG TAB METOPROLOL SR 50 MG TAB MOXONIDINE 0.3MG TAB LENVATINIB 4MG TAB OXCARBAZEPINE 150 MG TAB OXYBUTYNIN 2.5 MG TAB PRAMIPEXOLE 0.25MG TAB LEVOSULPIRIDE (75MG) + ESOMEPRAZOLE (40MG) CAP ROPINIROLE 1MG TAB S AMLODEPINE 5 MG TAB S ALMETEROL (50MCG) + FLUTICASONE PROPIONATE (250MCG) [SERETIDE ACCILHAI ER 50/2501 SERTRALINE 50 MG TAB TIOTROPIUM BROMIDE 9	1 1 1 1 1 1 1 1 1 1 1 1	mg	1 x od 1 x od	After Meal	V V E E E E E V V
176 177 178 179 180 181 182 183 184 185 186 187	477 478 479 480 481 495 496 501 507 514 516 517	11708 11177 11047 10536 12683 10506	FENOFIBRATE 160MG TAB METFORMIN SR 1000 MG TAB METOPROLOL SR 25 MG TAB METOPROLOL SR 50 MG TAB MOXONIDINE 0.3MG TAB LENVATINIB 4MG TAB OXCARBAZEPINE 150 MG TAB PRAMIPEXOLE 0.25MG TAB LEVOSULPIRIDE (75MG) + ESOMEPRAZOLE (40MG) CAP ROPINIROLE 1MG TAB SALMETEROL (50MCG) + FLUTICASONE PROPIONATE (250MCG) [SERETIDE ACCUINALER 50/2501 SERTRALINE 50 MG TAB	1 1 1 1 1 1 1 1 1 1 1 1	mg	1 x od 1 x od	After Meal	V V E E E E E V V
176 177 178 179 180 181 182 183 184 185 186 187	477 478 479 480 481 495 501 507 514 516 517	11708 11177 11047 10536 12683 10506 10585 12368 12477	FENOFIBRATE 160MG TAB METFORMIN SR 1000 MG TAB METOPROLOL SR 25 MG TAB METOPROLOL SR 50 MG TAB METOPROLOL SR 50 MG TAB MOXONIDINE 0.3MG TAB LENVATINIB 4MG TAB OXCARBAZEPINE 150 MG TAB PRAMIPEXOLE 0.25MG TAB PRAMIPEXOLE 0.25MG TAB LEVOSULPIRIDE (75MG) + ESOMEPRAZOLE (40MG) CAP ROPINIROLE 1MG TAB SAMLODEPINE 5 MG TAB SALMETEROL (50MCG) + FLUTICASONE PROPIONATE (250MCG) [SERETIDE ACCUIHAL FR 50/2501 SERTRALINE 50 MG TAB TIOTROPIUM BROMIDE 9 MCG, 120 METERED DOSES/UNIT, INHALEROTACAP	1 1 1 1 1 1 1 1 1 1 1 1 1	mg No	1 x od 1 x od	After Meal anytime	V V E E E E V V E
176 177 178 179 180 181 182 183 184 185 186 187	477 478 479 480 481 495 501 507 514 516 517 520 533	11708 11177 11047 10536 12683 10506	FENOFIBRATE 160MG TAB METFORMIN SR 1000 MG TAB METOPROLOL SR 25 MG TAB METOPROLOL SR 50 MG TAB METOPROLOL SR 50 MG TAB MOXONIDINE 0.3MG TAB LENVATINIB 4MG TAB OXCARBAZEPINE 150 MG TAB PRAMIPEXOLE 0.25MG TAB LEVOSULPIRIDE (75MG) + ESOMEPRAZOLE (40MG) CAP ROPINIROLE 1MG TAB SAMLODEPINE 5 MG TAB SALMETEROL (50MCG) + FLUTICASONE PROPIONATE (250MCG) [SERETIDE ACCUIHALER 50/2501 SERTRALINE 50 MG TAB TIOTROPIUM BROMIDE 9 MCG, 120 METERED DOSES/UNIT, INHALEROTACAP	1 1 1 1 1 1 1 1 1 1 1 1 1	mg	1 x od 1 x od	After Meal	V V E E E E E V V E E E E E E E E E E E
176 177 178 179 180 181 182 183 184 185 186 187	477 478 479 480 481 495 501 507 514 516 517	11708 11177 11047 10536 12683 10506 10585 12368 12477	FENOFIBRATE 160MG TAB METFORMIN SR 1000 MG TAB METOPROLOL SR 25 MG TAB METOPROLOL SR 50 MG TAB MOXONIDINE 0.3MG TAB LENVATINIB 4MG TAB OXCARBAZEPINE 150 MG TAB PRAMIPEXOLE 0.25MG TAB LEVOSULPIRIDE (75MG) + ESOMEPRAZOLE (40MG) CAP ROPINIROLE 1MG TAB S AMLODEPINE 5 MG TAB S AMLODEPINE 5 MG TAB SALMETEROL (50MCG) + FLUTICASONE PROPIONATE (250MCG) [SERETIDE ACCILHAI ER 50/2501 SERTRALINE 50 MG TAB TIOTROPIUM BROMIDE 9 MCG, 120 METERED DOSES/UNIT, INHALEROTACAP TOPIRAMATE 50MG TAB TAMSULIN 0.4 MG +	1 1 1 1 1 1 1 1 1 1 1 1 1	mg No	1 x od 1 x od	After Meal anytime	V V E E E E V V E
176 177 178 179 180 181 182 183 184 185 186 187	477 478 479 480 481 495 501 507 514 516 517 520 533	11708 11177 11047 10536 12683 10506 10585 12368 12477	FENOFIBRATE 160MG TAB METFORMIN SR 1000 MG TAB METOPROLOL SR 25 MG TAB METOPROLOL SR 50 MG TAB METOPROLOL SR 50 MG TAB MOXONIDINE 0.3MG TAB LENVATINIB 4MG TAB OXCARBAZEPINE 150 MG TAB OXPBUTYNIN 2.5 MG TAB PRAMIPEXOLE 0.25MG TAB LEVOSULPIRIDE (75MG) + ESOMEPRAZOLE (40MG) CAP ROPINIROLE 1MG TAB S AMLODEPINE 5 MG TAB SALMETEROL (50MCG) + FLUTICASONE PROPIONATE (250MCG) [SERETIDE ACCUHALER 50/250] SERTRALINE 50 MG TAB TIOTROPIUM BROMIDE 9 MCG, 120 METERED DOSES/UNIT, INHALEROTACAP TOPIRAMATE 50MG TAB TAMSULIN 0.4 MG + DUTASTERIDE 5 MG TAB	1 1 1 1 1 1 1 1 1 1 1 1 1	mg	1 x od 1 x od	After Meal	V V E E E E E E V V E E E E E E E E E E
176 177 178 179 180 181 182 183 184 185 186 187 188 189	477 478 479 480 481 495 496 501 507 514 516 517 520 533	11708 11177 11047 10536 12683 10506 10585 12368 12477	FENOFIBRATE 160MG TAB METFORMIN SR 1000 MG TAB METOPROLOL SR 25 MG TAB METOPROLOL SR 50 MG TAB METOPROLOL SR 50 MG TAB MOXONIDINE 0.3MG TAB LENVATINIB 4MG TAB OXCARBAZEPINE 150 MG TAB OXYBUTYNIN 2.5 MG TAB PRAMIPEXOLE 0.25MG TAB LEVOSULPIRIDE (75MG) + ESOMEPRAZOLE (40MG) CAP ROPINIROLE 1MG TAB S AMLODEPINE 5 MG TAB SALMETEROL (50MCG) + FLUTICASONE PROPIONATE (250MCG) [SERETIDE ACCUIHAL FR 50/2501 SERTRALINE 50 MG TAB TIOTROPIUM BROMIDE 9 MCG, 120 METERED DOSES/UNIT, INHALEROTACAP TOPIRAMATE 50MG TAB TAMSULIN 0.4 MG + DUTASTERIDE 5 MG TAB (URIMAX -D) TAB	1 1 1 1 1 1 1 1 1 1 1 1 1 1	mg m	1 x od 1 x od	After Meal	V V E E E E V V E E E V V
176 177 178 179 180 181 182 183 184 185 186 187 188 189	477 478 479 480 481 495 501 507 514 516 517 520 533 534 538	11708 11177 11047 10536 12683 10506 10585 10585 12368 12477	FENOFIBRATE 160MG TAB METFORMIN SR 1000 MG TAB METOPROLOL SR 25 MG TAB METOPROLOL SR 50 MG TAB METOPROLOL SR 50 MG TAB MOXONIDINE 0.3MG TAB LENVATINIB 4MG TAB OXCARBAZEPINE 150 MG TAB OXYBUTYNIN 2.5 MG TAB PRAMIPEXOLE 0.25MG TAB LEVOSULPIRIDE (75MG) + ESOMEPRAZOLE (40MG) CAP ROPINIROLE 1MG TAB SAMLODEPINE 5 MG TAB SALMETEROL (50MCG) + FLUTICASONE PROPIONATE (250MCG) [SERETIDE ACCUHAL FR 50/2501 SERTRALINE 50 MG TAB TIOTROPIUM BROMIDE 9 MCG, 120 METERED DOSES/UNIT, INHALEROTACAP TOPIRAMATE 50MG TAB TAMSULIN 0.4 MG + DUTASTERIDE 5 MG TAB (URIMAX-D) TAB VENLAFAXINE 75 MG TAB	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	mg m	1 x od 1 x od	After Meal	V V E E E E E V V E E E E E E E E E E E
176 177 178 179 180 181 182 183 184 185 186 187 188 189	477 478 479 480 481 495 496 501 507 514 516 517 520 533	11708 11177 11047 10536 12683 10506 10585 12368 12477	FENOFIBRATE 160MG TAB METFORMIN SR 1000 MG TAB METOPROLOL SR 25 MG TAB METOPROLOL SR 50 MG TAB METOPROLOL SR 50 MG TAB MOXONIDINE 0.3MG TAB LENVATINIB 4MG TAB OXCARBAZEPINE 150 MG TAB OXYBUTYNIN 2.5 MG TAB PRAMIPEXOLE 0.25MG TAB LEVOSULPIRIDE (75MG) + ESOMEPRAZOLE (40MG) CAP ROPINIROLE 1MG TAB S AMLODEPINE 5 MG TAB SALMETEROL (50MCG) + FLUTICASONE PROPIONATE (250MCG) [SERETIDE ACCUIHAL FR 50/2501 SERTRALINE 50 MG TAB TIOTROPIUM BROMIDE 9 MCG, 120 METERED DOSES/UNIT, INHALEROTACAP TOPIRAMATE 50MG TAB TAMSULIN 0.4 MG + DUTASTERIDE 5 MG TAB (URIMAX -D) TAB	1 1 1 1 1 1 1 1 1 1 1 1 1 1	mg m	1 x od 1 x od	After Meal	V V E E E E V V E E E V V
176 177 178 179 180 181 182 183 184 185 186 187	477 478 479 480 481 495 501 507 514 516 517 520 533 534 538	11708 11177 11047 10536 12683 10506 10585 12368 12477 10933	FENOFIBRATE 160MG TAB METFORMIN SR 1000 MG TAB METOPROLOL SR 25 MG TAB METOPROLOL SR 25 MG TAB METOPROLOL SR 50 MG TAB MOXONIDINE 0.3MG TAB LENVATINIB 4MG TAB OXCARBAZEPINE 150 MG TAB PRAMIPEXOLE 0.25MG TAB LEVOSULPIRIDE (75MG) + ESOMEPRAZOLE (40MG) CAP ROPINIROLE 1MG TAB S AMLODEPINE 5 MG TAB SALMETEROL (50MCG) + FLUTICASONE PROPIONATE (250MCG) [SERETIDE ACCIHAL ER 50/2501 SERTRALINE 50 MG TAB TIOTROPIUM BROMIDE 9 MCG, 120 METERED DOSES/UNIT, INHALEROTACAP TOPIRAMATE 50MG TAB TAMSULIN 0.4 MG + DUTASTERIDE 5 MG TAB (URIMAX -D) TAB VENLAFAXINE 75 MG TAB	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	mg m	1 x od 1 x od	After Meal	V V E E E E V V E E V V
176 177 178 179 180 181 182 183 184 185 186 187 199 190 191	477 478 479 480 481 495 501 507 514 516 517 520 533 534 538	11708 11177 11047 10536 12683 10506 10585 12368 12477 10933	FENOFIBRATE 160MG TAB METFORMIN SR 1000 MG TAB METOPROLOL SR 25 MG TAB METOPROLOL SR 50 MG TAB METOPROLOL SR 50 MG TAB MOXONIDINE 0.3MG TAB LENVATINIB 4MG TAB OXCARBAZEPINE 150 MG TAB OXYBUTYNIN 2.5 MG TAB PRAMIPEXOLE 0.25MG TAB LEVOSULPIRIDE (75MG) + ESOMEPRAZOLE (40MG) CAP ROPINIROLE 1MG TAB S AMLODEPINE 5 MG TAB SALMETEROL (50MCG) + FLUTICASONE PROPIONATE (250MCG) (SERETIDE ACCIHAL ER 50/2501 SERTRALINE 50 MG TAB TIOTROPIUM BROMIDE 9 MCG, 120 METERED DOSES/UNIT, INHALEROTACAP TOPIRAMATE 50MG TAB TAMSULIN 0.4 MG + DUTASTERIDE 5 MG TAB (URIMAX -D) TAB VENLAFAXINE 75 MG TAB LEVETIRACETAM 500 MG TAB TEMOZOLOMIDE 20 MG TAB	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	mg m	1 x od 1 x od	After Meal	V V E E E V V V V V V V V V V V V V V V
176 177 178 179 180 181 182 183 184 185 186 187	477 478 479 480 481 495 501 507 514 516 517 520 533 534 538	11708 11177 11047 10536 12683 10506 10585 12368 12477 10933	FENOFIBRATE 160MG TAB METFORMIN SR 1000 MG TAB METOPROLOL SR 25 MG TAB METOPROLOL SR 50 MG TAB METOPROLOL SR 50 MG TAB MOXONIDINE 0.3MG TAB LENVATINIB 4MG TAB OXCARBAZEPINE 150 MG TAB OXYBUTYNIN 2.5 MG TAB PRAMIPEXOLE 0.25MG TAB LEVOSULPIRIDE (75MG) + ESOMEPRAZOLE (40MG) CAP ROPINIROLE 1MG TAB S AMLODEPINE 5 MG TAB S AMLODEPINE 5 MG TAB SALMETEROL (50MCG) + FLUTICASONE PROPIONATE (250MCG) [SERETIDE ACCUHALER 50/2501 SERTRALINE 50 MG TAB TIOTROPIUM BROMIDE 9 MCG, 120 METERED DOSES/UNIT, INHALEROTACAP TOPIRAMATE 50MG TAB TAMSULIN 0.4 MG + DUTASTERIDE 5 MG TAB (URIMAX -D) TAB VENLAFAXINE 75 MG TAB LEVETIRACETAM 500 MG TAB LEVETIRACETAM 500 MG TAB LEVETIRACETAM 500 MG TAB LEVETIRACETAM 500 MG TAB LEMOZOLOMIDE 20 MG TAB LATANOPROST (0.005% W/V)	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	mg m	1 x od 1 x od	After Meal	V V E E E E V V E E V V
176 177 178 180 181 182 183 184 185 186 187 188 190 191 192 193	477 478 479 480 481 495 501 507 514 516 517 520 533 534 534 538	11708 11177 11047 10536 12683 10506 10585 10585 12368 12477 10933 12367 10934 11041 12083	FENOFIBRATE 160MG TAB METFORMIN SR 1000 MG TAB METOPROLOL SR 25 MG TAB METOPROLOL SR 50 MG TAB METOPROLOL SR 50 MG TAB MOXONIDINE 0.3MG TAB LENVATINIB 4MG TAB OXCARBAZEPINE 150 MG TAB PRAMIPEXOLE 0.25MG TAB LEVOSULPIRIDE (75MG) + ESOMEPRAZOLE (40MG) CAP ROPINIROLE 1MG TAB S AMLODEPINE 5 MG TAB S AMLODEPINE 5 MG TAB SALMETEROL (50MCG) + FLUTICASONE PROPIONATE (250MCG) [SERETIDE ACCUIHAL FR 50/2501 SERTRALINE 50 MG TAB TIOTROPIUM BROMIDE 9 MCG, 120 METERED DOSES/UNIT, INHALEROTACAP TOPIRAMATE 50MG TAB TAMSULIN 0.4 MG + DUTASTERIDE 5 MG TAB VENLAFAXINE 75 MG TAB VENLAFAXINE 75 MG TAB LEVETIRACETAM 500 MG TAB LEVETIRACETAM 500 MG TAB LEVETIRACETAM 500 MG TAB LEVETIRACETAM 500 MG TAB LEMOZOLOMIDE 20 MG TAB LATANOPROST (0.005% W/V) EYE DROPS	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	mg m	1 x od	After Meal LA	V V E E E E E V V V V V V V V V V V V V
176 177 178 179 180 181 182 183 184 185 186 187 190 191 192 193 194 195	477 478 479 480 481 495 501 507 514 516 517 520 533 534 538 545 560	11708 11177 11047 10536 12683 10506 10585 12368 12477 10933 12367 10934 11041 12083 11761	FENOFIBRATE 160MG TAB METFORMIN SR 1000 MG TAB METOPROLOL SR 25 MG TAB METOPROLOL SR 25 MG TAB METOPROLOL SR 50 MG TAB LENVATINIB 4MG TAB OXCARBAZEPINE 150 MG TAB OXCARBAZEPINE 150 MG TAB PRAMIPEXOLE 0.25MG TAB LEVOSULPIRIDE (75MG) + ESOMEPRAZOLE (40MG) CAP ROPINIROLE 1MG TAB SAMLODEPINE 5 MG TAB SALMETEROL (50MCG) + FLUTICASONE PROPIONATE (250MCG) [SERETIDE ACCUIHALER 50/250] SERTRALINE 50 MG TAB TIOTROPIUM BROMIDE 9 MCG, 120 METERED DOSES/UNIT, INHALEROTACAP TOPIRAMATE 50MG TAB TAMSULIN 0.4 MG + DUTASTERIDE 5 MG TAB (URIMAX -D) TAB VENLAFAXINE 75 MG TAB LEVETIRACETAM 500 MG TAB LEVETIRACETAM 500 MG TAB LATANOPROST (0.005% W/V) EYE DROPS ACARBOSE 50 MG TAB	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	mg m	1 x od	After Meal	V V E E E E E V V V V V V V V V V V V V
176 177 178 179 180 181 182 183 184 185 186 187 190 191 192 193 194 195 196 197	477 478 479 480 481 495 496 501 507 514 516 517 520 533 534 538 545 560 567 569 573	11708 11177 11047 10536 12683 10506 10585 12368 12477 10933 12367 10934 11041 12083 11761 16104	FENOFIBRATE 160MG TAB METFORMIN SR 1000 MG TAB METOPROLOL SR 25 MG TAB METOPROLOL SR 25 MG TAB METOPROLOL SR 50 MG TAB MOXONIDINE 0.3MG TAB LENVATINIB 4MG TAB OXCARBAZEPINE 150 MG TAB OXCARBAZEPINE 150 MG TAB PRAMIPEXOLE 0.25MG TAB LEVOSULPIRIDE (75MG) + ESOMEPRAZOLE (40MG) CAP ROPINIROLE 1MG TAB S AMLODEPINE 5 MG TAB S ALMETEROL (50MCG) + FLUTICASONE PROPIONATE (250MCG) [SERETIDE ACCUIHALER 50/250] SERTRALINE 50 MG TAB TIOTROPIUM BROMIDE 9 MCG, 120 METERED DOSES/UNIT, INHALEROTACAP TOPIRAMATE 50MG TAB TAMSULIN 0.4 MG + DUTASTERIDE 5 MG TAB (URIMAX -D.) TAB VENLAFAXINE 75 MG TAB LEVETIRACETAM 500 MG TAB LEVETIRACETAM 500 MG TAB TEMOZOLOMIDE 20 MG TAB LATANOPROST (0.005% W/V) EYE DROPS ACARBOSE 50 MG TAB CARVEDILOL 6.25 MG TAB	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	mg m	1 x od	After Meal LA WITH MEAL After Meal	V V E E E V V V V V V V V V V V V V V V
176 177 178 179 180 181 182 183 184 185 186 187 190 191 192 193 194 195	477 478 479 480 481 495 501 507 514 516 517 520 533 534 538 545 560	11708 11177 11047 10536 12683 10506 10585 12368 12477 10933 12367 10934 11041 12083 11761	FENOFIBRATE 160MG TAB METFORMIN SR 1000 MG TAB METOPROLOL SR 25 MG TAB METOPROLOL SR 25 MG TAB METOPROLOL SR 50 MG TAB LENVATINIB 4MG TAB OXCARBAZEPINE 150 MG TAB OXCARBAZEPINE 150 MG TAB PRAMIPEXOLE 0.25MG TAB LEVOSULPIRIDE (75MG) + ESOMEPRAZOLE (40MG) CAP ROPINIROLE 1MG TAB SAMLODEPINE 5 MG TAB SALMETEROL (50MCG) + FLUTICASONE PROPIONATE (250MCG) [SERETIDE ACCUIHALER 50/250] SERTRALINE 50 MG TAB TIOTROPIUM BROMIDE 9 MCG, 120 METERED DOSES/UNIT, INHALEROTACAP TOPIRAMATE 50MG TAB TAMSULIN 0.4 MG + DUTASTERIDE 5 MG TAB (URIMAX -D) TAB VENLAFAXINE 75 MG TAB LEVETIRACETAM 500 MG TAB LEVETIRACETAM 500 MG TAB LATANOPROST (0.005% W/V) EYE DROPS ACARBOSE 50 MG TAB	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	mg m	1 x od	After Meal	V V E E E E V V V V V V V V V V V V V V
176 177 178 179 180 181 182 183 184 185 186 187 190 191 192 193 194 195 196 197	477 478 479 480 481 495 496 501 507 514 516 517 520 533 534 538 545 560 567 569 573	11708 11177 11047 10536 12683 10506 10585 12368 12477 10933 12367 10934 11041 12083 11761 16104	FENOFIBRATE 160MG TAB METFORMIN SR 1000 MG TAB METOPROLOL SR 25 MG TAB METOPROLOL SR 25 MG TAB METOPROLOL SR 50 MG TAB MOXONIDINE 0.3MG TAB LENVATINIB 4MG TAB OXCARBAZEPINE 150 MG TAB OXCARBAZEPINE 150 MG TAB PRAMIPEXOLE 0.25MG TAB LEVOSULPIRIDE (75MG) + ESOMEPRAZOLE (40MG) CAP ROPINIROLE 1MG TAB S AMLODEPINE 5 MG TAB S ALMETEROL (50MCG) + FLUTICASONE PROPIONATE (250MCG) [SERETIDE ACCUIHALER 50/250] SERTRALINE 50 MG TAB TIOTROPIUM BROMIDE 9 MCG, 120 METERED DOSES/UNIT, INHALEROTACAP TOPIRAMATE 50MG TAB TAMSULIN 0.4 MG + DUTASTERIDE 5 MG TAB (URIMAX -D.) TAB VENLAFAXINE 75 MG TAB LEVETIRACETAM 500 MG TAB LEVETIRACETAM 500 MG TAB TEMOZOLOMIDE 20 MG TAB LATANOPROST (0.005% W/V) EYE DROPS ACARBOSE 50 MG TAB CARVEDILOL 6.25 MG TAB	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	mg m	1 x od	After Meal LA WITH MEAL After Meal	V V E E E V V V V V V V V V V V V V V V

199	578	13249	CIPROFLOXACIN 500MG TAB	1	mg	1 x od	After Meal	V
200	581	12306	CLONAZEPAM 0.5MG TAB	1	mg	1 x od	After Meal	٧
201	582		INJ STREPTOMYCIN 750 MG	1	NO	once in a month	After Meal	V
202		44060		1	No			E
202	591	11969	RECOMBINANT HUMAN	1	NO	1 x weekly	After Meal	_
			ERYTHROPOIETIN ALFA					
			(4000IU)					
203	596	11707	METFORMIN SR 500 MG TAB	1	mg	1 x bd	After Meal	V
204	597		METOPROLOL 25 MG TAB	1	mg	1 x od	After Meal	V
205	598	11509	RIVAROXABAN 10 MG TAB	1	mg	1 x od	After Meal	V
	330							
206		13701	INJ NITROGLYCERIN (5MG)	1	mg	1 x od	After Meal	V
207	602		SILVER SULFADIAZINE OINT	15	gm	Local apply once a	LA	E
						day		
208	605	12375	PAROXETINE 12.5MG TAB	1	mg	1 x od	After Meal	D
209	609	12704	PYRIDOXIN 100 MG TAB	1	mg	1 x od	After Meal	D
210	610	12704	PYRIDOXIN 40 MG TAB	1		1 x od	After Meal	D
					mg			
211	613		FAROPENEM SODIUM 200 MG	1	mg	1 x od	After Meal	D
			TAB					
212	618	10902	LEVODOPA (100MG) +	1	mg	1 x od	After Meal	V
			CARBIDOPA (25MG) TAB					
213	619	10901	LEVODOPA (100MG) +	1	mg	1 x od	After Meal	V
	0.0		. ,	•	9	1 7 00	Alter Medi	•
244	201	40045	CARBIDOPA (10MG) TAB				A.C	
214	621	10645	PYRAZINAMIDE 1500MG TAB	11	mg	1 x od	After Meal	Е
215	624	11932	TOLTERODINE 1 MG TAB	1	mg	1 x od	After Meal	D
216	636	12358	FLUVOXAMINE (LUVOX) 100	1	mg	1 x od	After Meal	D
			MG TAB					
217	637	16718	NORETHISTERONE (5MG) TAB	1	mg	1 x od	After Meal	٧
217	031	107 10	HORETHOTERONE (SWIG) TAB		ilig	1 A UU	AIGI MGAI	
0.10	044	40=0=	NOVELON TAB (ETUNG)			4	A 64 2.5	
218	644	16707	NOVELON TAB (ETHINYL	1	mg	1 x od	After Meal	E
			ESTRADIOL 0.03MG +					
			DESOGESTREL 0.15MG)					
219	646	11726	MIFEPRISTONE 200MG TAB	1	mg	1 x od	After Meal	Е
220	649	11502	ACETAZOLAMIDE 250MG TAB	1	mg	1 x od	After Meal	V
		11302						
221	662		SYP AMBROXOL (20MG/5ML) +	10	ML	1 tsp x od	After Meal	E
			CHLORPHENIRAMINE					
			MALEATE (2MG/5ML) +					
			DEXTROMETHORPHAN					
000	074	44000	HYDROBROMIDE (10MG/5ML)	400	1	4.4	- 6 4	V
222	674	11680	SYP LACTULOSE 100 ML BOTT	100	ml	1 tsp x od	after dinner	V
223	678	12214	SYP	100	ML	1 tsp x od	After Meal	V
			PERACTIN(CYPROHEPTADINE)			-		
			LIGIOTIN(OTT ROTTE: TABILE)					
224		44050	EVP METOCI OPPOMINE LICI	40	D.C.	d ton v ad	After Meel	D
224		11650	SYP METOCLOPROMIDE HCL	10	ML	1 tsp x od	After Meal	D
224		11650	SYP METOCLOPROMIDE HCL 5MG/5ML BOTTLE OF 30 ML	10	ML	1 tsp x od	After Meal	D
224		11650		10	ML	1 tsp x od	After Meal	D
224	683	11650		10	ML No	1 tsp x od	After Meal	D E
225		11650	5MG/5ML BOTTLE OF 30 ML SYRINGE 10ML	1	No	1 x od	LA	E
225 226	684	11650	5MG/5ML BOTTLE OF 30 ML SYRINGE 10ML SYRINGE 20ML	1	No No	1 x od 1 x od	LA LA	E E
225 226 227	684 685	11650	5MG/5ML BOTTLE OF 30 ML SYRINGE 10ML SYRINGE 20ML SYRINGE 2ML	1 1 1	No No No	1 x od 1 x od 1 x od	LA LA LA	E E
225 226 227 228	684 685 686		5MG/5ML BOTTLE OF 30 ML SYRINGE 10ML SYRINGE 20ML SYRINGE 2ML SYRINGE5ML	1 1 1	No No No	1 x od 1 x od 1 x od 1 x od 1 x od	LA LA LA	E E E
225 226 227 228 229	684 685 686 688	11784	SYRINGE 10ML SYRINGE 20ML SYRINGE 20ML SYRINGE 2ML SYRINGE5ML METFORMIN 500 MG TAB	1 1 1 1	No No No	1 x od 1 x od 1 x od 1 x od 1 x od 1 x bd	LA LA LA LA After Meal	E E E V
225 226 227 228	684 685 686		5MG/5ML BOTTLE OF 30 ML SYRINGE 10ML SYRINGE 20ML SYRINGE 2ML SYRINGE5ML	1 1 1	No No No	1 x od 1 x od 1 x od 1 x od 1 x od	LA LA LA	E E E
225 226 227 228 229	684 685 686 688	11784	SYRINGE 10ML SYRINGE 20ML SYRINGE 20ML SYRINGE 2ML SYRINGE5ML METFORMIN 500 MG TAB	1 1 1 1	No No No No mg	1 x od 1 x od 1 x od 1 x od 1 x od 1 x bd	LA LA LA LA After Meal	E E E V
225 226 227 228 229 230 231	684 685 686 688 697 699	11784	SYRINGE 10ML SYRINGE 20ML SYRINGE 2ML SYRINGE 2ML SYRINGE5ML METFORMIN 500 MG TAB RABEPRAZOLE 20 MG TAB AMLODIPINE 2.5 MG TAB	1 1 1 1 1 1	No No No No mg mg	1 x od 1 x od 1 x od 1 x od 1 x bd 1 x od 1 x od 1 x od	LA LA LA LA After Meal Before Meal After breakfast	E E E V E
225 226 227 228 229 230 231 232	684 685 686 688 697 699 708	11784 11686	SYRINGE 10ML SYRINGE 20ML SYRINGE 20ML SYRINGE 2ML SYRINGE5ML METFORMIN 500 MG TAB RABEPRAZOLE 20 MG TAB AMLODIPINE 2.5 MG TAB ACARBOSE 25 MG TAB	1 1 1 1 1 1 1	No No No No mg mg mg	1 x od 1 x od	LA LA LA LA After Meal Before Meal After breakfast WITH MEAL	E E V E E E
225 226 227 228 229 230 231 232 233	684 685 686 688 697 699 708 710	11784 11686	SYRINGE 10ML SYRINGE 20ML SYRINGE 20ML SYRINGE 2ML SYRINGE5ML METFORMIN 500 MG TAB RABEPRAZOLE 20 MG TAB AMLODIPINE 2.5 MG TAB ACARBOSE 25 MG TAB AMANTADINE 100MG TAB	1 1 1 1 1 1 1 1	No No No No mg mg mg mg	1 x od 1 x od 1 x od 1 x od 1 x bd 1 x od 1 x od 1 x od 1 x od 1 x od	LA LA LA LA After Meal Before Meal After breakfast WITH MEAL After Meal	E E E E E E E E E E E E E E E E E E E
225 226 227 228 229 230 231 232 233 234	684 685 686 688 697 699 708 710	11784 11686 10910 11206	SYRINGE 10ML SYRINGE 20ML SYRINGE 20ML SYRINGE 2ML SYRINGE5ML SYRINGE5ML METFORMIN 500 MG TAB RABEPRAZOLE 20 MG TAB AMLODIPINE 2.5 MG TAB ACARBOSE 25 MG TAB AMANTADINE 100MG TAB AMLODEPINE 10MG TAB	1 1 1 1 1 1 1 1 1	No No No No mg mg mg mg	1 x od 1 x od	LA LA LA LA After Meal Before Meal After breakfast WITH MEAL After Meal After Meal	E E E E E E V
225 226 227 228 229 230 231 232 233 234 235	684 685 686 688 697 699 708 710 712 714	11784 11686 10910 11206 11141	SYRINGE 10ML SYRINGE 20ML SYRINGE 20ML SYRINGE 2ML SYRINGE 5ML SYRINGE5ML METFORMIN 500 MG TAB RABEPRAZOLE 20 MG TAB AMLODIPINE 2.5 MG TAB ACARBOSE 25 MG TAB AMANTADINE 100MG TAB AMLODEPINE 10MG TAB AMLODEPINE 10MG TAB ATENOLOL 50 MG TAB	1 1 1 1 1 1 1 1 1 1 1	No No No No mg mg mg mg mg mg mg	1 x od 1 x od	LA LA LA LA After Meal Before Meal After breakfast WITH MEAL After Meal After Meal After Meal	E E V V V
225 226 227 228 229 230 231 232 233 234 235 236	684 685 686 688 697 699 708 710 712 714 715	11784 11686 10910 11206 11141 10701	SYRINGE 10ML SYRINGE 20ML SYRINGE 20ML SYRINGE 2ML SYRINGE5ML METFORMIN 500 MG TAB AMLODIPINE 2.5 MG TAB ACARBOSE 25 MG TAB AMANTADINE 100MG TAB AMLODEPINE 10MG TAB AMLODEPINE 10MG TAB AATENOLOL 50 MG TAB AZATHIOPRINE 50 MG TAB	1 1 1 1 1 1 1 1 1	No No No No mg mg mg mg	1 x od 1 x od	LA LA LA LA After Meal Before Meal After breakfast WITH MEAL After Meal After Meal After Meal After Meal After Meal	E E E E E E V
225 226 227 228 229 230 231 232 233 234 235	684 685 686 688 697 699 708 710 712 714	11784 11686 10910 11206 11141	SYRINGE 10ML SYRINGE 20ML SYRINGE 20ML SYRINGE 2ML SYRINGE 5ML SYRINGE5ML METFORMIN 500 MG TAB RABEPRAZOLE 20 MG TAB AMLODIPINE 2.5 MG TAB ACARBOSE 25 MG TAB AMANTADINE 100MG TAB AMLODEPINE 10MG TAB AMLODEPINE 10MG TAB ATENOLOL 50 MG TAB	1 1 1 1 1 1 1 1 1 1 1	No No No No mg mg mg mg mg mg mg	1 x od 1 x od	LA LA LA LA After Meal Before Meal After breakfast WITH MEAL After Meal After Meal After Meal	E E V V V
225 226 227 228 229 230 231 232 233 234 235 236 237	684 685 686 688 697 699 708 710 712 714 715	11784 11686 10910 11206 11141 10701 11102	SYRINGE 10ML SYRINGE 20ML SYRINGE 20ML SYRINGE 2ML SYRINGE 5ML SYRINGE 5ML METFORMIN 500 MG TAB RABEPRAZOLE 20 MG TAB AMLODIPINE 2.5 MG TAB AMANTADINE 100MG TAB AMLODEPINE 10MG TAB AMLODEPINE 10MG TAB ATENOLOL 50 MG TAB AZATHIOPRINE 50 MG TAB CARVEDILOL 12.5 MG TAB	1 1 1 1 1 1 1 1 1 1 1 1	No No No No mg	1 x od 1 x od	LA LA LA LA After Meal Before Meal After breakfast WITH MEAL After Meal	E E E V V V V E E E E E E E E E E E E E
225 226 227 228 229 230 231 232 233 234 235 236 237 238	684 685 686 688 697 699 708 710 712 714 715 720 721	11784 11686 10910 11206 11141 10701	SYRINGE 10ML SYRINGE 20ML SYRINGE 20ML SYRINGE 2ML SYRINGE 5ML METFORMIN 500 MG TAB RABEPRAZOLE 20 MG TAB AMLODIPINE 2.5 MG TAB AMANTADINE 100MG TAB AMLODEPINE 10MG TAB ATENOLO 50 MG TAB AZATHIOPRINE 50 MG TAB CARVEDILOL 12.5 MG TAB	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	No No No No No mg	1 x od 1 x od	LA LA LA LA LA After Meal Before Meal After breakfast WITH MEAL After Meal	E E E V V V E E E E E E E E E E E E E E
225 226 227 228 229 230 231 232 233 234 235 236 237 238	684 685 686 688 697 699 708 710 712 714 715 720 721	11784 11686 10910 11206 11141 10701 11102	SYRINGE 10ML SYRINGE 20ML SYRINGE 20ML SYRINGE 2ML SYRINGE 2ML SYRINGE5ML METFORMIN 500 MG TAB RABEPRAZOLE 20 MG TAB AMLODIPINE 2.5 MG TAB ACARBOSE 25 MG TAB AMANTADINE 100MG TAB AMLODEPINE 10MG TAB ATENOLOL 50 MG TAB AZATHIOPRINE 50 MG TAB CARVEDILOL 12.5 MG TAB CARVEDILOL 3.125 MG TAB ED CANDIBIOTIC	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	No No No No No mg	1 x od 1 x od	LA LA LA LA LA After Meal Before Meal After breakfast WITH MEAL After Meal LA	E E E E E E E E E E E E E E E E E E E
225 226 227 228 229 230 231 232 233 234 235 236 237 238 239	684 685 686 688 697 699 708 710 712 714 715 720 721 734 749	11784 11686 10910 11206 11141 10701 11102	SYRINGE 10ML SYRINGE 20ML SYRINGE 20ML SYRINGE 2ML SYRINGE 5ML METFORMIN 500 MG TAB AMLODIPINE 2.5 MG TAB AMANTADINE 100MG TAB AMLODEPINE 10MG TAB AMLODEPINE 10MG TAB AMLODEPINE 10MG TAB ATENOLOL 50 MG TAB AZATHIOPRINE 50 MG TAB CARVEDILOL 12.5 MG TAB CARVEDILOL 3.125 MG TAB ED CANDIBIOTIC ED PREDNISOLONE 1%	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	No No No No No mg	1 x od 1 x od	LA LA LA LA LA After Meal Before Meal After breakfast WITH MEAL After Meal After Meal After Meal After Meal After Meal After Meal LA	E E E V V E E E E E E E E E E E E E E E
225 226 227 228 229 230 231 232 233 234 235 236 237 238	684 685 686 688 697 699 708 710 712 714 715 720 721	11784 11686 10910 11206 11141 10701 11102	SYRINGE 10ML SYRINGE 20ML SYRINGE 20ML SYRINGE 2ML SYRINGE 5ML METFORMIN 500 MG TAB AMLODIPINE 2.5 MG TAB AMANTADINE 100MG TAB AMLODEPINE 10MG TAB CARVEDILOL 50 MG TAB AZATHIOPRINE 50 MG TAB CARVEDILOL 12.5 MG TAB CARVEDILOL 3.125 MG TAB CARVEDILOL 3.125 MG TAB ED CANDIBIOTIC ED PREDNISOLONE 1% FLUCONAZOLE 150 MG	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	No No No No No mg	1 x od 1 x od	LA LA LA LA LA After Meal Before Meal After breakfast WITH MEAL After Meal LA	E E E E E E E E E E E E E E E E E E E
225 226 227 228 229 230 231 232 233 234 235 236 237 238 239 240	684 685 686 688 697 699 708 710 712 714 715 720 721 734 749	11784 11686 10910 11206 11141 10701 11102 11101	SYRINGE 10ML SYRINGE 20ML SYRINGE 20ML SYRINGE 2ML SYRINGE 2ML SYRINGE5ML METFORMIN 500 MG TAB RABEPRAZOLE 20 MG TAB AMLODIPINE 2.5 MG TAB AMANTADINE 100MG TAB AMANTADINE 100MG TAB ATENOLOL 50 MG TAB AZATHIOPRINE 50 MG TAB CARVEDILOL 12.5 MG TAB CARVEDILOL 12.5 MG TAB CARVEDILOL 3.125 MG TAB ED CANDIBIOTIC ED PREDNISOLONE 1% FLUCONAZOLE 150 MG CAP/TAP	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	No No No No No mg	1 x od 1 x od	LA LA LA LA After Meal Before Meal After breakfast WITH MEAL After Meal LA LA After Meal	E E E E E E V V V V V V V V V V V V V V
225 226 227 228 229 230 231 232 233 234 235 236 237 238 239	684 685 686 688 697 699 708 710 712 714 715 720 721 734 749	11784 11686 10910 11206 11141 10701 11102	SYRINGE 10ML SYRINGE 20ML SYRINGE 20ML SYRINGE 2ML SYRINGE 5ML METFORMIN 500 MG TAB AMLODIPINE 2.5 MG TAB AMANTADINE 100MG TAB AMLODEPINE 10MG TAB ACARBOSE 25 MG TAB AMLODEPINE 10MG TAB AMLODEPINE 10MG TAB ACARBOSE 25 MG TAB AZATHIOPRINE 50 MG TAB CARVEDILOL 12.5 MG TAB CARVEDILOL 3.125 MG TAB ED CANDIBIOTIC ED PREDNISOLONE 1% FLUCONAZOLE 150 MG	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	No No No No No mg	1 x od 1 x od	LA LA LA LA LA After Meal Before Meal After breakfast WITH MEAL After Meal After Meal After Meal After Meal After Meal After Meal LA	E E E E E E V
225 226 227 228 229 230 231 232 233 234 235 236 237 238 239 240	684 685 686 688 697 699 708 710 712 714 715 720 721 734 749	11784 11686 10910 11206 11141 10701 11102 11101	SYRINGE 10ML SYRINGE 20ML SYRINGE 20ML SYRINGE 2ML SYRINGE 2ML SYRINGE5ML METFORMIN 500 MG TAB RABEPRAZOLE 20 MG TAB AMLODIPINE 2.5 MG TAB AMANTADINE 100MG TAB AMANTADINE 100MG TAB AMEDIC 100MG TAB ATENOLO 50 MG TAB AZATHIOPRINE 50 MG TAB CARVEDILOL 12.5 MG TAB CARVEDILOL 12.5 MG TAB CARVEDILOL 3.125 MG TAB ED CANDIBIOTIC ED PREDNISOLONE 1% FLUCONAZOLE 150 MG CAPITAP GABAPENTIN 300MG TAB /	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	No No No No No mg	1 x od 1 x od	LA LA LA LA After Meal Before Meal After breakfast WITH MEAL After Meal LA LA After Meal	E E E E E E E V V V
225 226 227 228 229 230 231 232 233 234 235 236 237 238 239 240	684 685 686 688 697 699 708 710 712 714 715 720 734 749 752	11784 11686 10910 11206 11141 10701 11102 11101 10658	SYRINGE 10ML SYRINGE 20ML SYRINGE 20ML SYRINGE 2ML SYRINGE 5ML SYRINGE 5ML METFORMIN 500 MG TAB AMADDIPINE 2.5 MG TAB AMANTADINE 100MG TAB AMANTADINE 100MG TAB AMLODEPINE 10MG TAB AMANTADINE 10MG TAB ATENOLOL 50 MG TAB AZATHIOPRINE 50 MG TAB CARVEDILOL 12.5 MG TAB CARVEDILOL 12.5 MG TAB CARVEDILOL 3.125 MG TAB ED CANDIBIOTIC ED PREDNISOLONE 1% FLUCONAZOLE 150 MG CAP/TAP GABAPENTIN 300MG TAB / CAP	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	No No No No No Mo	1 x od	LA LA LA LA LA After Meal Before Meal After breakfast WITH MEAL After Meal LA LA LA After Meal	E E E V V E E E E V V V E E E E E E V V V E
225 226 227 228 229 230 231 232 233 234 235 236 237 238 239 240	684 685 686 688 697 699 708 710 712 714 715 720 721 734 749	11784 11686 10910 11206 11141 10701 11102 11101	SYRINGE 10ML SYRINGE 20ML SYRINGE 20ML SYRINGE 2ML SYRINGE 2ML SYRINGE5ML METFORMIN 500 MG TAB AMLODIPINE 2.5 MG TAB AMANTADINE 100MG TAB AMANTADINE 100MG TAB AMLODEPINE 10MG TAB ATENOLOL 50 MG TAB AZATHIOPRINE 50 MG TAB CARVEDILOL 12.5 MG TAB CARVEDILOL 3.125 MG TAB ED CANDIBIOTIC ED PREDNISOLONE 1% FLUCONAZOLE 150 MG CAPITAP GABAPENTIN 300MG TAB / CAP INJ IRON 500MG (FERRIC	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	No No No No No mg	1 x od 1 x od	LA LA LA LA After Meal Before Meal After breakfast WITH MEAL After Meal LA LA After Meal	E E E E E E V V V V V V V V V V V V V V
225 226 227 228 229 230 231 232 233 234 235 236 237 238 239 240 241	684 685 686 688 697 699 708 710 712 714 715 720 721 734 749 752	11784 11686 10910 11206 11141 10701 11102 11101 10658 10548	SYRINGE 10ML SYRINGE 20ML SYRINGE 20ML SYRINGE 2ML SYRINGE 2ML SYRINGE 5ML METFORMIN 500 MG TAB RABEPRAZOLE 20 MG TAB AMLODIPINE 2.5 MG TAB AMANTADINE 100MG TAB AMLODEPINE 10MG TAB AMLODEPINE 50 MG TAB AZATHIOPRINE 50 MG TAB CARVEDILOL 12.5 MG TAB CARVEDILOL 3.125 MG TAB ED CANDIBIOTIC ED PREDNISOLONE 1% FLUCONAZOLE 150 MG CAP/TAP GABAPENTIN 300MG TAB / CAP INJ IRON 500MG (FERRIC CARBOXYMALTOSE)	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	No No No No No No mg	1 x od	LA LA LA LA LA After Meal Before Meal After breakfast WITH MEAL After Meal LA LA After Meal After Meal	E E E E E E E E E E E E E E E E E E E
225 226 227 228 229 230 231 232 233 234 235 236 237 238 239 240 241 242	684 685 686 688 697 699 708 710 712 714 715 720 721 734 749 752 754	11784 11686 10910 11206 11141 10701 11102 11101 10658 10548 11003	SYRINGE 10ML SYRINGE 20ML SYRINGE 20ML SYRINGE 2ML SYRINGE 2ML SYRINGE5ML METFORMIN 500 MG TAB RABEPRAZOLE 20 MG TAB AMLODIPINE 2.5 MG TAB AMANTADINE 100MG TAB AMANTADINE 100MG TAB ATENOLOL 50 MG TAB CARVEDILOL 12.5 MG TAB CARVEDILOL 12.5 MG TAB CARVEDILOL 12.5 MG TAB CARVEDILOL 12.5 MG TAB CARVEDILOL 13.125 MG TAB CARVEDILOL 13.125 MG TAB CARVEDILOL 3.125 MG TAB CAP/TAP GABAPENTIN 300MG TAB / CAP/TAP INJ IRON 500MG (FERRIC CARBOXYMALTOSE) LETROZOLE 2.5MG TAB	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	No No No No No No mg	1 x od	LA LA LA LA LA After Meal Before Meal After breakfast WITH MEAL After Meal LA LA After Meal	E E E E V V V E E E E V V V V E E E E V
225 226 227 228 229 230 231 232 233 234 235 236 237 238 239 240 241	684 685 686 688 697 699 708 710 712 714 715 720 721 734 749 752 754	11784 11686 10910 11206 11141 10701 11102 11101 10658 10548 11003 10876 10303	SYRINGE 10ML SYRINGE 20ML SYRINGE 20ML SYRINGE 2ML SYRINGE 2ML SYRINGE5ML METFORMIN 500 MG TAB RABEPRAZOLE 20 MG TAB AMLODIPINE 2.5 MG TAB ACARBOSE 25 MG TAB AMANTADINE 100MG TAB AMLODEPINE 10MG TAB ATENOLOL 50 MG TAB AZATHIOPRINE 50 MG TAB CARVEDILOL 12.5 MG TAB CARVEDILOL 12.5 MG TAB ED CANDIBIOTIC ED PREDNISOLONE 1% FLUCONAZOLE 150 MG CAPITAP GABAPENTIN 300MG TAB / CAP INJ IRON 500MG (FERRIC CARBOXYMALTOSE) LETROZOLE 2.5 MG TAB LEVOCETRIZINE 5MG TAB	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	No No No No No No mg	1 x od	LA LA LA LA LA LA After Meal Before Meal After breakfast WITH MEAL After Meal LA LA LA After Meal After Meal After Meal After Meal After Meal	E E E E V V E E E E V V E E E E E V V E
225 226 227 228 229 230 231 232 233 234 235 236 237 238 239 240 241 242	684 685 686 688 697 699 708 710 712 714 715 720 721 734 749 752 754	11784 11686 10910 11206 11141 10701 11102 11101 10658 10548 11003	SYRINGE 10ML SYRINGE 20ML SYRINGE 20ML SYRINGE 2ML SYRINGE 2ML SYRINGE5ML METFORMIN 500 MG TAB RABEPRAZOLE 20 MG TAB AMLODIPINE 2.5 MG TAB AMANTADINE 100MG TAB AMANTADINE 100MG TAB ATENOLOL 50 MG TAB CARVEDILOL 12.5 MG TAB CARVEDILOL 12.5 MG TAB CARVEDILOL 12.5 MG TAB CARVEDILOL 12.5 MG TAB CARVEDILOL 13.125 MG TAB CARVEDILOL 13.125 MG TAB CARVEDILOL 3.125 MG TAB CAP/TAP GABAPENTIN 300MG TAB / CAP/TAP INJ IRON 500MG (FERRIC CARBOXYMALTOSE) LETROZOLE 2.5MG TAB	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	No No No No No No mg	1 x od	LA LA LA LA LA After Meal Before Meal After breakfast WITH MEAL After Meal LA LA After Meal	E E E E V V V E E E E V V V V E E E E V
225 226 227 228 229 230 231 232 233 234 235 236 237 238 239 240 241 242 243	684 685 686 688 697 699 708 710 712 714 715 720 721 734 749 752 754	11784 11686 10910 11206 11141 10701 11102 11101 10658 10548 11003 10876 10303 11187	SYRINGE 10ML SYRINGE 20ML SYRINGE 20ML SYRINGE 2ML SYRINGE 2ML SYRINGE5ML METFORMIN 500 MG TAB AMLODIPINE 2.5 MG TAB AMANTADINE 100MG TAB AMANTADINE 100MG TAB AMLODEPINE 10MG TAB ATENOLOL 50 MG TAB AZATHIOPRINE 50 MG TAB CARVEDILOL 12.5 MG TAB CARVEDILOL 12.5 MG TAB ED CANDIBIOTIC ED PREDNISOLONE 1% FLUCONAZOLE 150 MG CAPITAP GABAPENTIN 300MG TAB / CAP INJ IRON 500MG (FERRIC CARBOXYMALTOSE) LETROZOLE 2.5MG TAB LEVOCETRIZINE 5MG TAB LEVOCETRIZINE 5MG TAB	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	No No No No No No mg	1 x od	LA LA LA LA LA After Meal Before Meal After breakfast WITH MEAL After Meal LA LA LA After Meal	E E E E V V E E E E V V E E E E E V V E
225 226 227 228 229 230 231 232 233 234 235 236 237 238 240 241 242	684 685 686 688 697 699 708 710 712 714 715 720 721 734 749 752 754 759	11784 11686 10910 11206 11141 10701 11102 11101 10658 10548 11003 10876 10303	SYRINGE 10ML SYRINGE 20ML SYRINGE 20ML SYRINGE 2ML SYRINGE 2ML SYRINGE5ML METFORMIN 500 MG TAB AMLODIPINE 2.5 MG TAB AMANTADINE 100MG TAB AMLODEPINE 10MG TAB AMLODEPINE 10MG TAB AMLODEPINE 10MG TAB AMLODEPINE 10MG TAB ACARBOSE 25 MG TAB AMLODEPINE 10MG TAB AMLODEPINE 10MG TAB ACARBOSE 25 MG TAB CARVEDILOL 50 MG TAB CARVEDILOL 12.5 MG TAB CARVEDILOL 3.125 MG TAB ED CANDIBIOTIC ED PREDNISOLONE 1% FLUCONAZOLE 150 MG CAP/TAP GABAPENIN 300MG TAB / CAP INJ IRON 500MG (FERRIC CARBOXYMALTOSE) LETROZOLE 2.5MG TAB LEVOCETRIZINE 5MG TAB LOSARTAN 50 MG TAB MEDROXY PROGESTRONE	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	No No No No No No mg	1 x od	LA LA LA LA LA LA After Meal Before Meal After breakfast WITH MEAL After Meal LA LA LA After Meal After Meal After Meal After Meal After Meal	E E E E E E E E E E E E E E E E E E E
225 226 227 228 229 230 231 232 233 234 235 236 237 238 239 240 241 242 243	684 685 686 688 697 699 708 710 712 714 715 720 721 734 749 752 754 759	10910 11206 11141 10701 11102 11101 10658 10548 11003 10876 10303 11187 10877	SYRINGE 10ML SYRINGE 20ML SYRINGE 20ML SYRINGE 2ML SYRINGE 2ML SYRINGE 5ML METFORMIN 500 MG TAB RABEPRAZOLE 20 MG TAB AMLODIPINE 2.5 MG TAB AMANTADINE 100MG TAB AMLODEPINE 10MG TAB AMLODEPINE 10MG TAB ATENOLOL 50 MG TAB CARVEDILOL 12.5 MG TAB CARVEDILOL 12.5 MG TAB CARVEDILOL 3.125 MG TAB ED CANDIBIOTIC ED PREDNISOLONE 1% FLUCONAZOLE 150 MG CAP/TAP GABAPENTIN 300MG TAB / CAP INJ IRON 500MG (FERRIC CARBOXYMALTOSE) LETROZOLE 2.5 MG TAB LOSARTAN 50 MG TAB MEDROXY PROGESTRONE 10MG TAB	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	No No No No No No No mg	1 x od	LA LA LA LA LA After Meal Before Meal After breakfast WITH MEAL After Meal	E E E E E V V V E E E E V V V V E E V V V V E E V V V V E E V V V E E V V V V E E V
225 226 227 228 229 230 231 232 233 234 235 236 237 238 239 240 241 242 243	684 685 686 688 697 699 708 710 712 714 715 720 721 734 749 752 754 759 768 769	11784 11686 10910 11206 11141 10701 11102 11101 10658 10548 11003 10876 10303 11187 10877	SYRINGE 10ML SYRINGE 20ML SYRINGE 20ML SYRINGE 2ML SYRINGE 5ML METFORMIN 500 MG TAB RABEPRAZOLE 20 MG TAB AMLODIPINE 2.5 MG TAB AMANTADINE 100MG TAB AMANTADINE 100MG TAB ATENOLOL 50 MG TAB CARVEDILOL 12.5 MG TAB CARVEDILOL 12.5 MG TAB CARVEDILOL 12.5 MG TAB CARVEDILOL 12.5 MG TAB CARVEDILOL 13.125 MG TAB ED CANDIBIOTIC ED PREDNISOLONE 1% FLUCONAZOLE 150 MG CAP/TAP GABAPENTIN 300MG TAB / CAP INJ IRON 500MG (FERRIC CARBOXYMALTOSE) LETROZOLE 2.5MG TAB LEVOCETRIZINE 5MG TAB LOSARTAN 50 MG TAB MEDROXY PROGESTRONE 10MG TAB CARBIMAZOLE 20 MG TAB	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	No No No No No No No mg	1 x od	LA LA LA LA LA After Meal Before Meal After breakfast WITH MEAL After Meal	E E E V V V E E V V V V V V V V V V V V
225 226 227 228 229 230 231 232 233 234 235 236 237 238 239 240 241 242 243	684 685 686 688 697 699 708 710 712 714 715 720 721 734 749 752 754 759	10910 11206 11141 10701 11102 11101 10658 10548 11003 10876 10303 11187 10877	SYRINGE 10ML SYRINGE 20ML SYRINGE 20ML SYRINGE 2ML SYRINGE 5ML SYRINGE 5ML METFORMIN 500 MG TAB AMLODIPINE 2.5 MG TAB AMANTADINE 100MG TAB AMANTADINE 100MG TAB AMLODEPINE 10MG TAB AMLODEPINE 10MG TAB ATENOLOL 50 MG TAB AZATHIOPRINE 50 MG TAB CARVEDILOL 12.5 MG TAB CARVEDILOL 12.5 MG TAB CARVEDILOL 3.125 MG TAB ED CANDIBIOTIC ED PREDNISOLONE 1% FLUCONAZOLE 150 MG CAP/TAP GABAPENTIN 300MG TAB / CAP INJ IRON 500MG (FERRIC CARBOXYMALTOSE) LETROZOLE 2.5MG TAB LEVOCETRIZINE 5MG TAB LOSARTAN 50 MG TAB MEDROXY PROGESTRONE 10MG TAB CARBIMAZOLE 20 MG TAB CARBIMAZOLE 20 MG TAB ACYCLOVIR (3% W/W) EYE	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	No No No No No No No mg	1 x od	LA LA LA LA LA After Meal Before Meal After breakfast WITH MEAL After Meal	E E E E E V V V E E E E V V V V E E V V V V E E V V V V E E V V V E E V V V V E E V
225 226 227 228 229 230 231 232 233 234 235 236 237 238 239 240 241 242 243	684 685 686 688 697 699 708 710 712 714 715 720 721 734 749 752 754 759 768 769	11784 11686 10910 11206 11141 10701 11102 11101 10658 10548 11003 10876 10303 11187 10877	SYRINGE 10ML SYRINGE 20ML SYRINGE 20ML SYRINGE 2ML SYRINGE 5ML METFORMIN 500 MG TAB RABEPRAZOLE 20 MG TAB AMLODIPINE 2.5 MG TAB AMANTADINE 100MG TAB AMANTADINE 100MG TAB ATENOLOL 50 MG TAB CARVEDILOL 12.5 MG TAB CARVEDILOL 12.5 MG TAB CARVEDILOL 12.5 MG TAB CARVEDILOL 12.5 MG TAB CARVEDILOL 13.125 MG TAB ED CANDIBIOTIC ED PREDNISOLONE 1% FLUCONAZOLE 150 MG CAP/TAP GABAPENTIN 300MG TAB / CAP INJ IRON 500MG (FERRIC CARBOXYMALTOSE) LETROZOLE 2.5MG TAB LEVOCETRIZINE 5MG TAB LOSARTAN 50 MG TAB MEDROXY PROGESTRONE 10MG TAB CARBIMAZOLE 20 MG TAB	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	No No No No No No No mg	1 x od	LA LA LA LA LA After Meal Before Meal After breakfast WITH MEAL After Meal	E E E V V V E E V V V V V V V V V V V V
225 226 227 228 229 230 231 232 233 234 235 236 237 238 239 240 241 242 243	684 685 686 688 697 699 708 710 712 714 715 720 721 734 749 752 754 759 764 765 768 769	11784 11686 10910 11206 11141 10701 11102 11101 10658 10548 11003 10876 10303 11187 10877	SYRINGE 10ML SYRINGE 20ML SYRINGE 20ML SYRINGE 2ML SYRINGE 2ML SYRINGE 5ML METFORMIN 500 MG TAB AMLODIPINE 2.5 MG TAB AMANTADINE 100MG TAB AMLODEPINE 10MG TAB AMLODEPINE 10MG TAB AMLODEPINE 10MG TAB AMLODEPINE 10MG TAB CARVEDILOL 50 MG TAB AZATHIOPRINE 50 MG TAB CARVEDILOL 12.5 MG TAB CARVEDILOL 12.5 MG TAB CARVEDILOL 12.5 MG TAB CARVEDILOL 3.125 MG TAB ED CANDIBIOTIC ED PREDNISOLONE 1% FLUCONAZOLE 150 MG CAP/TAP GABAPENTIN 300MG FERRIC CARBOXYMALTOSE) LETROZOLE 2.5MG TAB LEVOCETRIZINE 5MG TAB LOSARTAN 50 MG TAB MEDROXY PROGESTRONE 10MG TAB CARBIMAZOLE 20 MG TAB CARBIMAZOLE 20 MG TAB ACYCLOVIR (3% W/W) EYE OINTMENT	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	No No No No No No No Mg	1 x od	LA LA LA LA LA LA After Meal Before Meal After breakfast WITH MEAL After Meal LA LA LA After Meal	E E E E E E E E E E E E E E E E E E E
225 226 227 228 229 230 231 232 233 234 235 236 237 238 239 240 241 242 243	684 685 686 688 697 699 708 710 712 714 715 720 721 734 749 752 754 759 768 769	11784 11686 10910 11206 11141 10701 11102 11101 10658 10548 11003 10876 10303 11187 10877	SYRINGE 10ML SYRINGE 20ML SYRINGE 20ML SYRINGE 2ML SYRINGE 2ML SYRINGE 5ML METFORMIN 500 MG TAB AMLODIPINE 2.5 MG TAB AMANTADINE 100MG TAB AMLODEPINE 10MG TAB AMLODEPINE 10MG TAB AMLODEPINE 10MG TAB AMLODEPINE 10MG TAB ATENOLOL 50 MG TAB CARVEDILOL 12.5 MG TAB CARVEDILOL 12.5 MG TAB CARVEDILOL 12.5 MG TAB CARVEDILOL 3.125 MG TAB CARVEDILOL 3.125 MG TAB CARVEDILOL 3.125 MG TAB ED CANDIBIOTIC ED PREDNISOLONE 1% FLUCONAZOLE 150 MG CAP/TAP GABAPENTIN 300MG TAB / CAP INJ IRON 500MG (FERRIC CARBOXYMALTOSE) LETROZOLE 2.5 MG TAB LEVOCETRIZINE 5MG TAB LOSARTAN 50 MG TAB MEDROXY PROGESTRONE 10MG TAB CARBIMAZOLE 20 MG TAB ACYCLOVIR (3% W/W) EYE OINTMENT HALOBETASOL+SALICYLIC	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	No No No No No No No mg	1 x od 1	LA LA LA LA LA After Meal Before Meal After breakfast WITH MEAL After Meal	E E E V V V E E V V V V V V V V V V V V
225 226 227 228 229 230 231 232 233 234 235 236 237 238 239 241 242 243 244 245 244 245 247	684 685 686 688 697 699 708 710 712 714 715 720 721 734 749 752 754 759 768 769 773 775	10910 11206 11141 10701 11102 11101 10658 10548 11003 10876 10303 11187 10877 10583 12001	SYRINGE 10ML SYRINGE 20ML SYRINGE 20ML SYRINGE 2ML SYRINGE 2ML SYRINGE 5ML METFORMIN 500 MG TAB RABEPRAZOLE 20 MG TAB AMLODIPINE 2.5 MG TAB AMANTADINE 100MG TAB AMLODEPINE 10MG TAB AMLODEPINE 10MG TAB ATENOLOL 50 MG TAB CARVEDILOL 12.5 MG TAB CARVEDILOL 12.5 MG TAB CARVEDILOL 12.5 MG TAB CARVEDILOL 3.125 MG TAB ED CANDIBIOTIC ED PREDNISOLONE 1% FLUCONAZOLE 150 MG CAP/TAP GABAPENTIN 300MG TAB / CAP INJ IRON 500MG (FERRIC CARBOXYMALTOSE) LETROZOLE 2.5MG TAB LEVOCETRIZINE 5MG TAB LOSARTAN 50 MG TAB MEDROXY PROGESTRONE 10MG TAB CARBIMAZOLE 20 MG TAB ACYCLOVIR (3% W/W) EYE QINTMENT HALOBETASOL+SALICYLIC ACID CREAM	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	No No No No No No No Mg	1 x od 2	LA LA LA LA LA After Meal Before Meal After breakfast WITH MEAL After Meal LA LA After Meal LA	E E E E V V V V D D D
225 226 227 228 229 230 231 232 233 234 235 236 237 238 240 241 242 243 244 245 246 247 248 249	684 685 686 688 697 699 708 710 712 714 715 720 721 734 749 752 754 759 764 765 768 769 773 775	11784 11686 10910 11206 11141 10701 11102 11101 10658 10548 11003 10876 10303 11187 10877 10583 12001 11307	SYRINGE 10ML SYRINGE 20ML SYRINGE 20ML SYRINGE 2ML SYRINGE 5ML SYRINGE 5ML METFORMIN 500 MG TAB AMADOIPINE 2.5 MG TAB AMANTADINE 100MG TAB AMANTADINE 100MG TAB AMLODEPINE 10MG TAB AMLODEPINE 10MG TAB ATENOLOL 50 MG TAB AZATHIOPRINE 50 MG TAB CARVEDILOL 12.5 MG TAB CARVEDILOL 12.5 MG TAB CARVEDILOL 3.125 MG TAB ED CANDIBIOTIC ED PREDNISOLONE 1% FLUCONAZOLE 150 MG CAP/TAP GABAPENTIN 300MG TAB / CAP INJ IRON 500MG (FERRIC CARBOXYMALTOSE) LETROZOLE 2.5MG TAB LEVOCETRIZINE 5MG TAB LEVOCETRIZINE 5MG TAB LOSARTAN 50 MG TAB MEDROXY PROGESTRONE 10MG TAB CARBIMAZOLE 20 MG TAB ACYCLOVIR (3% W/W) EYE OINTMENT HALOBETASOL+SALICYLIC ACID CREAM MOXIFLOXACIN 400 MG TAB	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	No No No No No No Mg	1 x od 1	LA LA LA LA LA After Meal Before Meal After breakfast WITH MEAL After Meal LA LA LA After Meal After Meal After Meal LA LA LA After Meal LA LA LA After Meal After Meal After Meal After Meal LA LA	E E E V V V E E V V V D D D V V
225 226 227 228 229 230 231 232 233 234 235 236 237 238 239 241 242 243 244 245 244 245 247	684 685 686 688 697 699 708 710 712 714 715 720 721 734 749 752 754 759 768 769 773 775	10910 11206 11141 10701 11102 11101 10658 10548 11003 10876 10303 11187 10877 10583 12001	SYRINGE 10ML SYRINGE 20ML SYRINGE 20ML SYRINGE 2ML SYRINGE 2ML SYRINGE 5ML METFORMIN 500 MG TAB AMADODIPINE 2.5 MG TAB AMANTADINE 100MG TAB AMANTADINE 100MG TAB AMLODEPINE 10MG TAB ATENOLOL 50 MG TAB AZATHIOPRINE 50 MG TAB CARVEDILOL 12.5 MG TAB CARVEDILOL 12.5 MG TAB ED CANDIBIOTIC ED PREDNISOLONE 1% FLUCONAZOLE 150 MG CAPITAP GABAPENTIN 300MG TAB / CAP INJ IRON 500MG (FERRIC CARBOXYMALTOSE) LETROZOLE 2.5MG TAB LEVOCETRIZINE 5MG TAB LOSARTAN 50 MG TAB MEDROXY PROGESTRONE 10MG TAB ACYCLOVIR (3% W/W) EYE OINTMENT HALOBETASOL+SALICYLIC ACID CREAM MOXIFLOXACIN 400 MG TAB INJ METHYLERGOMETRINE	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	No No No No No No No Mg	1 x od 2	LA LA LA LA LA After Meal Before Meal After breakfast WITH MEAL After Meal LA LA After Meal LA	E E E E V V V V D D D
225 226 227 228 229 230 231 232 233 234 235 236 237 238 239 240 241 242 243 244 245 248 249 250	684 685 686 688 697 699 708 710 712 714 715 720 721 734 749 752 754 759 764 765 768 769 773 775	11784 11686 10910 11206 11141 10701 11102 11101 10658 10548 11003 10876 10303 11187 10877 10583 12001 11307	SYRINGE 10ML SYRINGE 20ML SYRINGE 20ML SYRINGE 2ML SYRINGE 5ML METFORMIN 500 MG TAB RABEPRAZOLE 20 MG TAB AMLODIPINE 2.5 MG TAB AMANTADINE 100MG TAB AMLODEPINE 10MG TAB AMLODEPINE 10MG TAB ATENOLOL 50 MG TAB AZATHIOPRINE 50 MG TAB CARVEDILOL 12.5 MG TAB CARVEDILOL 12.5 MG TAB CARVEDILOL 3.125 MG TAB ED CANDIBIOTIC ED PREDNISOLONE 1% FLUCONAZOLE 150 MG CAP/TAP GABAPENTIN 300MG (FERRIC CARBOXYMALTOSE) LETROZOLE 2.5 MG TAB LEVOCETRIZINE 5MG TAB LOSARTAN 50 MG TAB MEDROXY PROGESTRONE 10MG TAB ACYCLOVIR (3% W/W) EYE OINTMENT HALOBETASOL+SALICYLIC ACID CREAM MOXIFLOXACIN 400 MG TAB INJ METHYLERGOMETRINE (0.2MG)	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	No No No No No No Mg	1 x od 1	LA LA LA LA LA After Meal Before Meal After breakfast WITH MEAL After Meal LA LA LA After Meal After Meal After Meal LA LA LA After Meal LA LA LA After Meal After Meal After Meal After Meal LA LA	E E E V V V E E V V V D D D V V
225 226 227 228 229 230 231 232 233 234 235 236 237 238 240 241 242 243 244 245 246 247 248 249	684 685 686 688 697 699 708 710 712 714 715 720 721 734 749 752 754 759 764 765 768 769 773 775	11784 11686 10910 11206 11141 10701 11102 11101 10658 10548 11003 10876 10303 11187 10877 10583 12001 11307	SYRINGE 10ML SYRINGE 20ML SYRINGE 20ML SYRINGE 2ML SYRINGE 2ML SYRINGE 5ML METFORMIN 500 MG TAB AMADODIPINE 2.5 MG TAB AMANTADINE 100MG TAB AMANTADINE 100MG TAB AMLODEPINE 10MG TAB ATENOLOL 50 MG TAB AZATHIOPRINE 50 MG TAB CARVEDILOL 12.5 MG TAB CARVEDILOL 12.5 MG TAB ED CANDIBIOTIC ED PREDNISOLONE 1% FLUCONAZOLE 150 MG CAPITAP GABAPENTIN 300MG TAB / CAP INJ IRON 500MG (FERRIC CARBOXYMALTOSE) LETROZOLE 2.5MG TAB LEVOCETRIZINE 5MG TAB LOSARTAN 50 MG TAB MEDROXY PROGESTRONE 10MG TAB ACYCLOVIR (3% W/W) EYE OINTMENT HALOBETASOL+SALICYLIC ACID CREAM MOXIFLOXACIN 400 MG TAB INJ METHYLERGOMETRINE	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	No No No No No No Mg	1 x od 1	LA LA LA LA LA After Meal Before Meal After breakfast WITH MEAL After Meal LA LA LA After Meal After Meal After Meal LA LA LA After Meal LA LA LA After Meal After Meal After Meal After Meal LA LA	E E E V V V E E V V V D D D V V

254	793	10554	PHENYTOIN SODIUM 100 MG	1	mg	1 x od	After Meal	٧
			(EPTOIN)					
255	794	11786	PIOGLITAZONE 15 MG TAB	1	mg	1 x od	After Meal	E
256	796		PREGNANCY TEST KIT	1	No	1 x od	After Meal	E
257	800	11152	RAMIPRIL 2.5MG TAB	1	mg	1 x od	After Meal	V
258	801	11191	RAMIPRIL 5 MG TAB	1	mg	1 x od	After Meal	V
259	802	11192	RAMIPRIL 10 MG TAB	1	mg	1 x od	After Meal	E
260	805	12414	RIFAMPICIN 600MG TAB	1	mg	1 x od	After Meal	E
261	811	10293	TRAMADOL 50 MG CAP	1	mg	1 x od	Before Meal	E
262	813		ADHESIVE PLASTER 2.5	1	No	1 x od	After Meal	V
263	814		ADHESIVE PLASTER 5	1	No	sos	After Meal	V
264	815		ADHESIVE PLASTER 7.5	1	No	1 x od	After Meal	D
265	817	13203	AMOXYCILLIN 875 MG +	1	mg	1 x od	After Meal	E
			CLAVULANIC ACID 125 MG TAB					
266	819	12466	NINTEDANIB 100MG CAP	1	MG	1 x od	After Meal	D
267	823	12470	IPRAVENT SOLUTION	10	ml	sos	anytime	D
			(IPRATROPIUM BROMIDE)					
268	824	13273	INJ AMIKACIN SULPHATE 250	1	NO	1 x od	After Meal	D
			MG/ML					
269	826	13252	LEVOFLOX 500 MG TAB	1	mg	1 x od	After Meal	V
270	827	12606	LINEZOLID 600 MG TAB	1	mg	1 x od	After Meal	V
271	829	12684	SILDENAFIL CITRATE 50 MG	1	mg	1 x od	After Meal	٧
			TAB					
272	834	10833	GEFITINIB 250 MG TAB	1	mg	1 x od	After Meal	D
273	835	11320	CLOBETASOL 0.05% OINT	15	gm	Local apply once a	LA	٧
						dav		
274	836	11155	DIGOXIN 0.25 MG TAB	1	mg	1 x od	After Meal	٧
275	838	10275	PARACETAMOL 500 MG TAB	1	mg	1 x od	After Meal	V
276	843	16714	MELATONIN 3MG TAB	1	MG	1 x od	After Meal	E
277	845	13284	INJ ACYCLOVIR 250 MG	1	No	1 x od	After Meal	D
278	850	13920	ENZALUTAMIDE 40MG TAB	1	mg	1 x od	After Meal	D
279	852	11645	DOMPERIDONE 10 MG TAB	1	mg	1 x od	Before Meal	V
280	858	11770	GLIPIZIDE 5 MG TAB	11	mg	1 x od	Before Meal	V
281	861	11659	SULFASALAZINE 500 MG TAB	1	mg	1 x od	After Meal	E
282	863	11789	THYROXINE 25 MCG TAB	1	mg	1 x od	After Meal	V
283	864	11175	WARFARIN 5 MG TAB	1	mg	1 x od	After Meal	V
284	866	10297	FEBUXOSTAT 40MG TAB	1	mg	1 x od	After Meal	E
285	867	10855	TEMOZOLOMIDE 250MG CAP	1	mg	1 x od	After Meal	E
286	873	11034	TRANEXAMIC ACID 500 MG	1	mg	1 x od	After Meal	V
			TAB					
287	875	10856	THALIDOMIDE 50 MG TAB	1	mg	1 x od	After Meal	V
288	880		CINACALCET 30 MG (PTH) TAB	1		d vs and	After Meet	Е
	000		CINACALCET 30 MG (FTH) TAB		mg	1 x od	After Meal	_
	000		CINACALCET 30 MG (FTH) TAB	•	mg	1 x 0a	After Meai	_
289	881	10935	PREGABLIN 75 MG	1	mg	1 x od	After Meal	E
		10935 10926	` ,					
289	881		PREGABLIN 75 MG	1	mg	1 x od	After Meal	E
289	881		PREGABLIN 75 MG	1	mg	1 x od	After Meal	E
289 290	881 885	10926	PREGABLIN 75 MG TRIHEXYPHENIDYL (2MG) TAB CYPROTERONE 2MG +	1	mg mg	1 x od 1 x od	After Meal After Meal	E V
289 290	881 885	10926	PREGABLIN 75 MG TRIHEXYPHENIDYL (2MG) TAB	1	mg mg	1 x od 1 x od	After Meal After Meal	E V
289 290	881 885	10926	PREGABLIN 75 MG TRIHEXYPHENIDYL (2MG) TAB CYPROTERONE 2MG + ETHINYL ESTRADIOL 0.035MG	1	mg mg	1 x od 1 x od	After Meal After Meal	E V
289 290 291	881 885 887	10926 11722	PREGABLIN 75 MG TRIHEXYPHENIDYL (2MG) TAB CYPROTERONE 2MG + ETHINYL ESTRADIOL 0.035MG IDIANE 351 TAB	1 1	mg mg mg	1 x od 1 x od 1 x od	After Meal After Meal After Meal	E V
289 290 291	881 885 887	10926 11722 12329	PREGABLIN 75 MG TRIHEXYPHENIDYL (2MG) TAB CYPROTERONE 2MG + ETHINYL ESTRADIOL 0.035MG IDIANE 351 TAB LORAZEPAM 1 MG TAB	1 1 1	mg mg mg	1 x od 1 x od 1 x od	After Meal After Meal After Meal After Meal	E V
289 290 291	881 885 887	10926 11722 12329	PREGABLIN 75 MG TRIHEXYPHENIDYL (2MG) TAB CYPROTERONE 2MG + ETHINYL ESTRADIOL 0.035MG IDIANE 351 TAB LORAZEPAM 1 MG TAB LITHIUM CARBONATE 300 MG	1 1 1	mg mg mg	1 x od 1 x od 1 x od	After Meal After Meal After Meal After Meal	E V
289 290 291 291 292 293	881 885 887 892 893	10926 11722 12329 12331	PREGABLIN 75 MG TRIHEXYPHENIDYL (2MG) TAB CYPROTERONE 2MG + ETHINYL ESTRADIOL 0.035MG IDIANE 351 TAB LORAZEPAM 1 MG TAB LITHIUM CARBONATE 300 MG CAP/TAB	1 1 1 1	mg mg mg	1 x od 1 x od 1 x od 1 x od 1 x od	After Meal After Meal After Meal After Meal After Meal After Meal	E V V
289 290 291 291 292 293	881 885 887 892 893	10926 11722 12329 12331	PREGABLIN 75 MG TRIHEXYPHENIDYL (2MG) TAB CYPROTERONE 2MG + ETHINYL ESTRADIOL 0.035MG IDIANE 351 TAB LORAZEPAM 1 MG TAB LITHIUM CARBONATE 300 MG CAPITAB INJ LIGNOCAINE 2% WITHOUT	1 1 1 1	mg mg mg	1 x od 1 x od 1 x od 1 x od 1 x od	After Meal After Meal After Meal After Meal After Meal After Meal	E V V
289 290 291 291 292 293 294	881 885 887 892 893 895	10926 11722 12329 12331 10119	PREGABLIN 75 MG TRIHEXYPHENIDYL (2MG) TAB CYPROTERONE 2MG + ETHINYL ESTRADIOL 0.035MG IDIANE 351 TAB LORAZEPAM 1 MG TAB LITHIUM CARBONATE 300 MG CAP/TAB INJ LIGNOCAINE 2% WITHOUT ADRENALINE	1 1 1 1 1 1 1	mg mg mg mg	1 x od 1 x od 1 x od 1 x od 1 x od 1 x od sos	After Meal	E V V V
289 290 291 291 292 293 294 295	881 885 887 892 893 895	10926 11722 12329 12331 10119	PREGABLIN 75 MG TRIHEXYPHENIDYL (2MG) TAB CYPROTERONE 2MG + ETHINYL ESTRADIOL 0.035MG IDIANE 351 TAB LORAZEPAM 1 MG TAB LITHIUM CARBONATE 300 MG CAP/TAB INJ LIGNOCAINE 2% WITHOUT ADRENALINE DARBEPOETIN 40MG INJ	1 1 1 1 1 1 1 1	mg mg mg mg mg	1 x od 1 x od 1 x od 1 x od 1 x od 5 sos	After Meal	E V V V V
289 290 291 291 292 293 294 295 296	881 885 887 892 893 895 898 900	10926 11722 12329 12331 10119 11987 12327	PREGABLIN 75 MG TRIHEXYPHENIDYL (2MG) TAB CYPROTERONE 2MG + ETHINYL ESTRADIOL 0.035MG IDIANE 351 TAB LORAZEPAM 1 MG TAB LITHIUM CARBONATE 300 MG CAP/TAB INJ LIGNOCAINE 2% WITHOUT ADRENALINE DARBEPOETIN 40MG INJ IMIPRAMINE 25 MG TAB	1 1 1 1 1 1 1 1 1	mg mg mg mg no No mg	1 x od 1 x od 1 x od 1 x od 1 x od 1 x od sos 1 x od 1 x od 1 x od	After Meal	E V V V V E
289 290 291 291 292 293 294 295 296 297	881 885 887 892 893 895 898 900 901	10926 11722 12329 12331 10119 11987 12327 10863	PREGABLIN 75 MG TRIHEXYPHENIDYL (2MG) TAB CYPROTERONE 2MG + ETHINYL ESTRADIOL 0.035MG IDIANE 351 TAB LORAZEPAM 1 MG TAB LITHIUM CARBONATE 300 MG CAP/TAB INJ LIGNOCAINE 2% WITHOUT ADRENALINE DARBEPOETIN 40MG INJ IMIPRAMINE 25 MG TAB IMATINIB 400MG CAP	1 1 1 1 1 1 1 1	mg m	1 x od 1 x od 1 x od 1 x od 1 x od 1 x od sos 1 x od 1 x od 1 x od 1 x od	After Meal	E V V V E E E
289 290 291 291 292 293 294 295 296 297 298	881 885 887 892 893 895 898 990 901 902	10926 11722 12329 12331 10119 11987 12327 10863 10826	PREGABLIN 75 MG TRIHEXYPHENIDYL (2MG) TAB CYPROTERONE 2MG + ETHINYL ESTRADIOL 0.035MG IDIANE 351 TAB LORAZEPAM 1 MG TAB LITHIUM CARBONATE 300 MG CAP/TAB INJ LIGNOCAINE 2% WITHOUT ADRENALINE DARBEPOETIN 40MG INJ IMIPRAMINE 25 MG TAB IMATINIB 400MG CAP HYDROXYUREA 500 MG CAP	1 1 1 1 1 1 1 1 1 1 1	mg mg mg mg no No mg mg mg mg	1 x od 1 x od	After Meal	E V V V V E E V V
289 290 291 291 292 293 294 295 296 297 298 299	881 885 887 892 893 895 896 900 901 902 903	10926 11722 12329 12331 10119 11987 12327 12327 10863 10826 12325	PREGABLIN 75 MG TRIHEXYPHENIDYL (2MG) TAB CYPROTERONE 2MG + ETHINYL ESTRADIOL 0.035MG IDIANE 351 TAB LORAZEPAM 1 MG TAB LITHIUM CARBONATE 300 MG CAP/TAB INJ LIGNOCAINE 2% WITHOUT ADRENALINE DARBEPOETIN 40MG INJ IMIPRAMINE 25 MG TAB IMATINIB 400MG CAP HYDROXYUREA 500 MG CAP HALOPERIDOL 5MG TAB	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	mg mg mg mg no No mg mg mg mg mg	1 x od 1 x od	After Meal	E V V V E E E V E E
289 290 291 291 292 293 294 295 296 297 298 299 300	881 885 887 892 893 895 898 900 901 902 903 910	10926 11722 12329 12331 10119 11987 12327 10863 10826 12325 10706	PREGABLIN 75 MG TRIHEXYPHENIDYL (2MG) TAB CYPROTERONE 2MG + ETHINYL ESTRADIOL 0.035MG IDIANE 351 TAB LORAZEPAM 1 MG TAB LITHIUM CARBONATE 300 MG CAP/TAB INJ LIGNOCAINE 2% WITHOUT ADRENALINE DARBEPOETIN 40MG INJ IMIPRAMINE 25 MG TAB IMATINIB 400MG CAP HYDROXYUREA 500 MG CAP HALOPERIDOL 5MG TAB CYCLOSPORIN 100MG TAB	1 1 1 1 1 1 1 1 1 1 1 1 1	mg m	1 x od 1 x od	After Meal	E V V V E E E E E
289 290 291 291 293 294 295 296 297 298 299 300 301	881 885 887 892 893 895 896 900 901 902 903 910 912	10926 11722 12329 12331 10119 11987 12327 10863 10826 12325 10706 10541	PREGABLIN 75 MG TRIHEXYPHENIDYL (2MG) TAB CYPROTERONE 2MG + ETHINYL ESTRADIOL 0.035MG IDIANE 351 TAB LORAZEPAM 1 MG TAB LITHIUM CARBONATE 300 MG CAP/TAB INJ LIGNOCAINE 2% WITHOUT ADRENALINE DARBEPOETIN 40MG INJ IMIPRAMINE 25 MG TAB IMATINIB 400MG CAP HYDROXYUREA 500 MG CAP HALOPERIDOL 5MG TAB CYCLOSPORIN 100MG TAB CYCLOSPORIN 100MG TAB CLOBAZAM 5MG TAB	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	mg m	1 x od 1 x od	After Meal	E V V V E E E E E E E
289 290 291 291 293 294 295 296 297 298 299 300 301 302	881 885 887 892 893 895 898 900 901 902 903 903 910 912 919	10926 11722 12329 12331 10119 11987 12327 10863 10826 12325 10706 10541	PREGABLIN 75 MG TRIHEXYPHENIDYL (2MG) TAB CYPROTERONE 2MG + ETHINYL ESTRADIOL 0.035MG IDIANE 351 TAB LORAZEPAM 1 MG TAB LITHIUM CARBONATE 300 MG CAPITAB INJ LIGNOCAINE 2% WITHOUT ADRENALINE DARBEPOETIN 40MG INJ IMIPRAMINE 25 MG TAB IMATINIB 400MG CAP HYDROXYUREA 500 MG CAP HALOPERIDOL 5MG TAB CYCLOSPORIN 100MG TAB CLOBAZAM 5MG TAB PROPRANOLOL 20 MG TAB	1 1 1 1 1 1 1 1 1 1 1 1	mg mg mg mg no No mg	1 x od 1 x od	After Meal	E V V V E E E E E E E E
289 290 291 291 293 294 295 296 297 298 299 300 301 302 303	881 885 887 892 893 895 898 900 901 902 903 910 912 919	10926 11722 12329 12331 10119 11987 12327 10863 10826 12325 10706 10541	PREGABLIN 75 MG TRIHEXYPHENIDYL (2MG) TAB CYPROTERONE 2MG + ETHINYL ESTRADIOL 0.035MG IDIANE 351 TAB LORAZEPAM 1 MG TAB LITHIUM CARBONATE 300 MG CAP/TAB INJ LIGNOCAINE 2% WITHOUT ADRENALINE DARBEPOETIN 40MG INJ IMIPRAMINE 25 MG TAB IMATINIB 400MG CAP HYDROXYUREA 500 MG CAP HALOPERIDOL 5MG TAB CYCLOSPORIN 100MG TAB CLOBAZAM 5MG TAB PROPRANOLOL 20 MG TAB BANDAID STRIP	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	mg m	1 x od 1 x od	After Meal Anytime	E V V V V E E E E E E E E
289 290 291 291 293 294 295 296 297 298 299 300 301 302 303	881 885 887 892 893 895 898 900 901 902 903 910 912 919	10926 11722 12329 12331 10119 11987 12327 10863 10826 12325 10706 10541	PREGABLIN 75 MG TRIHEXYPHENIDYL (2MG) TAB CYPROTERONE 2MG + ETHINYL ESTRADIOL 0.035MG IDIANE 351 TAB LORAZEPAM 1 MG TAB LITHIUM CARBONATE 300 MG CAP/TAB INJ LIGNOCAINE 2% WITHOUT ADRENALINE DARBEPOETIN 40MG INJ IMIPRAMINE 25 MG TAB IMATINIB 400MG CAP HYDROXYUREA 500 MG CAP HALOPERIDOL 5MG TAB CYCLOSPORIN 100MG TAB CLOBAZAM 5MG TAB PROPRANOLOL 20 MG TAB BANDAID STRIP	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	mg m	1 x od 1 x od	After Meal Anytime	E V V V V E E E E E E E E
289 290 291 291 293 294 295 296 297 298 299 300 301 302 303 304	881 885 887 892 893 895 896 900 901 902 903 910 912 919 924	10926 11722 12329 12331 10119 11987 12327 10863 10826 12325 10706 10541	PREGABLIN 75 MG TRIHEXYPHENIDYL (2MG) TAB CYPROTERONE 2MG + ETHINYL ESTRADIOL 0.035MG IDIANE 351 TAB LORAZEPAM 1 MG TAB LITHIUM CARBONATE 300 MG CAP/TAB INJ LIGNOCAINE 2% WITHOUT ADRENALINE DARBEPOETIN 40MG INJ IMIPRAMINE 25 MG TAB IMATINIB 400MG CAP HYDROXYUREA 500 MG CAP HYDROXYUREA 500 MG CAP HALOPERIDOL 5MG TAB CYCLOSPORIN 100MG TAB CYCLOSPORIN 100MG TAB PROPRANOLOL 20 MG TAB BANDAID STRIP BANDAGE TRIANGULAR ROLL	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	mg m	1 x od 1 x od 5 x od 1 x od	After Meal	E V V V E E E E E E E E E
289 290 291 293 294 295 296 297 298 299 300 301 302 303 304 305	881 885 887 892 893 895 898 900 901 902 903 910 912 919 924 925	10926 11722 12329 12331 10119 11987 12327 10863 10826 12325 10706 10541	PREGABLIN 75 MG TRIHEXYPHENIDYL (2MG) TAB CYPROTERONE 2MG + ETHINYL ESTRADIOL 0.035MG IDIANE 351 TAB LORAZEPAM 1 MG TAB LITHIUM CARBONATE 300 MG CAP/TAB INJ LIGNOCAINE 2% WITHOUT ADRENALINE DARBEPOETIN 40MG INJ IMIPRAMINE 25 MG TAB IMATINIB 400MG CAP HYDROXYUREA 500 MG CAP HALOPERIDOL 5MG TAB CYCLOSPORIN 100MG TAB CYCLOSPORIN 100MG TAB PROPRANOLOL 20 MG TAB BANDAID STRIP BANDAGE TRIANGULAR ROLL BANDAGE 6CM X 4 METRES	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	mg m	1 x od 1 x od 5 x od 1 x od 5 x od	After Meal	E V V V E E E E E E E E E E E
289 290 291 293 294 295 296 297 298 299 300 301 302 303 304 305 306	881 885 887 892 893 895 898 900 901 902 903 910 912 919 924 925	10926 11722 12329 12331 10119 11987 12327 10863 10826 12325 10706 10541	PREGABLIN 75 MG TRIHEXYPHENIDYL (2MG) TAB CYPROTERONE 2MG + ETHINYL ESTRADIOL 0.035MG IDIANE 351 TAB LORAZEPAM 1 MG TAB LITHIUM CARBONATE 300 MG CAPITAB INJ LIGNOCAINE 2% WITHOUT ADRENALINE DARBEPOETIN 40MG INJ IMIPRAMINE 25 MG TAB IMATINIB 400MG CAP HYDROXYUREA 500 MG CAP HALOPERIDOL 5MG TAB CYCLOSPORIN 100MG TAB CYCLOSPORIN 100MG TAB BANDAGE TRIANGULAR ROLL BANDAGE 6CM X 4 METRES BANDAGE 2.5CM X 4 METRES	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	mg m	1 x od 1 x od 5 x od 1 x od 5 x os 5 x os	After Meal	E V V V V E E E E E E E E E E E E E E E
289 290 291 291 293 294 295 296 297 298 299 300 301 302 303 304 305 306 307	881 885 887 892 893 895 898 900 901 902 903 910 912 919 924 925	10926 11722 12329 12331 10119 11987 12327 10863 10826 12325 10706 10541 11205	PREGABLIN 75 MG TRIHEXYPHENIDYL (2MG) TAB CYPROTERONE 2MG + ETHINYL ESTRADIOL 0.035MG IDIANE 351 TAB LORAZEPAM 1 MG TAB LITHIUM CARBONATE 300 MG CAP/TAB INJ LIGNOCAINE 2% WITHOUT ADRENALINE DARBEPOETIN 40MG INJ IMIPRAMINE 25 MG TAB IMATINIB 400MG CAP HYDROXYUREA 500 MG CAP HALOPERIDOL 5MG TAB CYCLOSPORIN 100MG TAB CLOBAZAM 5MG TAB PROPRANOLOL 20 MG TAB BANDAID STRIP BANDAGE TRIANGULAR ROLL BANDAGE 6CM X 4 METRES BANDAGE 10 CM X 4 METRES	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	mg m	1 x od 1 x od 5 x od 1 x od 5 x os 5 x os	After Meal	E V V V V E E E E E E E E E E E E E E E
289 290 291 291 293 294 295 296 297 298 299 300 301 302 303 304 305 306 307 308	881 885 887 892 893 895 898 900 901 902 903 910 912 919 924 925 926 927	10926 11722 12329 12331 10119 11987 12327 10863 10826 12325 10706 10541 11205	PREGABLIN 75 MG TRIHEXYPHENIDYL (2MG) TAB CYPROTERONE 2MG + ETHINYL ESTRADIOL 0.035MG IDIANE 351 TAB LORAZEPAM 1 MG TAB LITHIUM CARBONATE 300 MG CAP/TAB INJ LIGNOCAINE 2% WITHOUT ADRENALINE DARBEPOETIN 40MG INJ IMIPRAMINE 25 MG TAB IMATINIB 400MG CAP HYDROXYUREA 500 MG CAP HYDROXYUREA 500 MG CAP CLOSPORIN 100MG TAB CYCLOSPORIN 100MG TAB CYCLOSPORIN 100MG TAB BANDAGE TRIANGULAR ROLL BANDAGE TRIANGULAR ROLL BANDAGE 5CM X 4 METRES BANDAGE 10 CM X 4 METRES BANDAGE 10 CM X 4 METRES BANDAGE 10 CM X 4 METRES	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	mg m	1 x od 5 x od 1 x od 5 x od 1	After Meal	E V V V E E E E E E E E E D D D
289 290 291 291 293 294 295 296 297 298 299 300 301 302 303 304 305 306 307 308	881 885 887 892 893 895 898 900 901 902 903 910 912 919 924 925 926 927 928	10926 11722 12329 12331 10119 11987 12327 10863 10826 12325 10706 10541 11205	PREGABLIN 75 MG TRIHEXYPHENIDYL (2MG) TAB CYPROTERONE 2MG + ETHINYL ESTRADIOL 0.035MG IDIANE 351 TAB LORAZEPAM 1 MG TAB LITHIUM CARBONATE 300 MG CAP/TAB INJ LIGNOCAINE 2% WITHOUT ADRENALINE DARBEPOETIN 40MG INJ IMIPRAMINE 25 MG TAB IMATINIB 400MG CAP HYDROXYUREA 500 MG CAP HYDROXYUREA 500 MG CAP HALOPERIDOL 5MG TAB CYCLOSPORIN 100MG TAB CYCLOSPORIN 100MG TAB BANDAID STRIP BANDAGE TRIANGULAR ROLL BANDAGE 5CM X 4 METRES BANDAGE 10 CM X 4 METRES BANDAGE 10 CM X 4 METRES SYP BACLOFEN 5MG/5ML BACLOFEN 10 MG TAB	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	mg m	1 x od	After Meal	E V V V E E E E E E E D D V V
289 290 291 293 294 295 296 297 298 299 300 301 302 303 304 305 306 307 309 310	881 885 887 892 893 895 898 900 901 902 903 910 912 919 924 925 926 927 928	10926 11722 12329 12331 10119 11987 12327 10863 10826 12325 10706 10541 11205	PREGABLIN 75 MG TRIHEXYPHENIDYL (2MG) TAB CYPROTERONE 2MG + ETHINYL ESTRADIOL 0.035MG IDIANE 351 TAB LORAZEPAM 1 MG TAB LITHIUM CARBONATE 300 MG CAPITAB INJ LIGNOCAINE 2% WITHOUT ADRENALINE DARBEPOETIN 40MG INJ IMIPRAMINE 25 MG TAB IMATINIB 400MG CAP HYDROXYUREA 500 MG CAP HALOPERIDOL 5MG TAB CYCLOSPORIN 100MG TAB CLOBAZAM 5MG TAB BANDAID STRIP BANDAGE TRIANGULAR ROLL BANDAGE 6CM X 4 METRES BANDAGE 10 CM X 4 METRES	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	mg m	1 x od 1 x od	After Meal	E V V V V E E E E E E E D D V V V
289 290 291 293 294 295 296 297 298 299 300 301 302 303 304 305 306 307 309 310	881 885 887 892 893 895 898 900 901 902 903 910 912 919 924 925 926 927 928	10926 11722 12329 12331 10119 11987 12327 10863 10826 12325 10706 10541 11205	PREGABLIN 75 MG TRIHEXYPHENIDYL (2MG) TAB CYPROTERONE 2MG + ETHINYL ESTRADIOL 0.035MG IDIANE 351 TAB LORAZEPAM 1 MG TAB LITHIUM CARBONATE 300 MG CAP/TAB INJ LIGNOCAINE 2% WITHOUT ADRENALINE DARBEPOETIN 40MG INJ IMIPRAMINE 25 MG TAB IMATINIB 400MG CAP HYDROXYUREA 500 MG CAP HALOPERIDOL 5MG TAB CLOBAZAM 5MG TAB PROPRANOLOL 20 MG TAB BANDAGE TRIANGULAR ROLL BANDAGE 6CM X 4 METRES BANDAGE 10 CM X 4 METRES BANDAGE 10 CM X 4 METRES SYP BACLOFEN 5MG/5ML BACLOFEN 10 MG TAB AMIODARONE 200MG TAB AMIODARONE 200MG TAB	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	mg m	1 x od	After Meal	E V V V V E E E E E E E D D V V V
289 290 291 291 294 295 296 297 298 300 301 302 303 304 305 306 307 308 309 310	881 885 887 892 893 895 898 900 901 902 903 910 912 919 924 925 926 927 928	10926 11722 12329 12331 10119 11987 12327 10826 12325 10706 10541 11205 12213 10570 11127 11955	PREGABLIN 75 MG TRIHEXYPHENIDYL (2MG) TAB CYPROTERONE 2MG + ETHINYL ESTRADIOL 0.035MG IDIANE 351 TAB LORAZEPAM 1 MG TAB LITHIUM CARBONATE 300 MG CAPITAB INJ LIGNOCAINE 2% WITHOUT ADRENALINE DARBEPOETIN 40MG INJ IMIPRAMINE 25 MG TAB IMATINIB 400MG CAP HYDROXYUREA 500 MG CAP HALOPERIDOL 5MG TAB CYCLOSPORIN 100MG TAB CLOBAZAM 5MG TAB BANDAID STRIP BANDAGE TRIANGULAR ROLL BANDAGE 6CM X 4 METRES BANDAGE 10 CM X 4 METRES	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	mg m	1 x od 1 x od	After Meal	E V V V V E E E E E E D D V V V D D
289 290 291 291 292 293 294 295 296 297 298 299 300 301 302 303 304 305 306 307 308 309 310 311	881 885 887 892 893 895 898 900 901 902 903 910 912 919 924 925 926 927 928 930 933 939	10926 11722 12329 12331 10119 11987 12327 10863 10826 12325 10706 10541 11205 12213 10570 11127 11955 10538	PREGABLIN 75 MG TRIHEXYPHENIDYL (2MG) TAB CYPROTERONE 2MG + ETHINYL ESTRADIOL 0.035MG IDIANE 351 TAB LORAZEPAM 1 MG TAB LITHIUM CARBONATE 300 MG CAP/TAB INJ LIGNOCAINE 2% WITHOUT ADRENALINE DARBEPOETIN 40MG INJ IMIPRAMINE 25 MG TAB IMATINIB 400MG CAP HYDROXYUREA 500 MG CAP HYDROXYUREA 500 MG CAP HALOPERIDOL 5MG TAB CYCLOSPORIN 100MG TAB COBAZAM 5MG TAB PROPRANOLOL 20 MG TAB BANDAGE TRIANGULAR ROLL BANDAGE TRIANGULAR ROLL BANDAGE 10 CM X 4 METRES BANDAGE 2.5CM X 4 METRES BANDAGE 10 CM X 1 METRES BANDAGE 10 CM X 2 METRES	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	mg m	1 x od	After Meal	E V V V E E E E E E D D V V V D E E E E
289 290 291 291 294 295 296 297 298 300 301 302 303 304 305 306 307 308 309 310	881 885 887 892 893 895 898 900 901 902 903 910 912 919 924 925 926 927 928	10926 11722 12329 12331 10119 11987 12327 10826 12325 10706 10541 11205 12213 10570 11127 11955	PREGABLIN 75 MG TRIHEXYPHENIDYL (2MG) TAB CYPROTERONE 2MG + ETHINYL ESTRADIOL 0.035MG IDIANE 351 TAB LORAZEPAM 1 MG TAB LITHIUM CARBONATE 300 MG CAP/TAB INJ LIGNOCAINE 2% WITHOUT ADRENALINE DARBEPOETIN 40MG INJ IMIPRAMINE 25 MG TAB IMATINIB 400MG CAP HYDROXYUREA 500 MG CAP HALOPERIDOL 5MG TAB CYCLOSPORIN 100MG TAB CLOBAZAM 5MG TAB PROPRANOLOL 20 MG TAB BANDAGE TRIANGULAR ROLL BANDAGE TRIANGULAR ROLL BANDAGE 10 CM X 4 METRES BANDAGE 2.5CM X 4 METRES BANDAGE 10 CM X 4 METRES BANDAGE 10	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	mg m	1 x od	After Meal	E V V V V E E E E E E E D D V V V D D
289 290 291 291 293 294 295 296 297 298 299 300 301 302 303 304 305 306 307 308 309 310 311 312	881 885 887 892 893 895 898 900 901 902 903 910 912 919 924 925 926 927 928 930 933 936	10926 11722 12329 12331 10119 11987 12327 10863 10826 12325 10706 10541 11205 12213 10570 11127 11955 10538 11028	PREGABLIN 75 MG TRIHEXYPHENIDYL (2MG) TAB CYPROTERONE 2MG + ETHINYL ESTRADIOL 0.035MG IDIANE 351 TAB LORAZEPAM 1 MG TAB LITHIUM CARBONATE 300 MG CAP/TAB INJ LIGNOCAINE 2% WITHOUT ADRENALINE DARBEPOETIN 40MG INJ IMIPRAMINE 25 MG TAB IMATINIB 400MG CAP HYDROXYUREA 500 MG CAP HALOPERIDOL 5MG TAB CYCLOSPORIN 100MG TAB CLOBAZAM 5MG TAB PROPRANOLOL 20 MG TAB BANDAGE 6CM X 4 METRES BANDAGE TRIANGULAR ROLL BANDAGE 10 CM X 4 METRES BANDAGE 10 CM X 1 METRES BANDAGE 10 CM X 1 METRES CYP BACLOFEN 5MG/5ML BACLOFEN 10 MG TAB AMIODARONE 200MG TAB ALFACALCIDOL VITAMIN D3 0.25 MCG CAP CARBAMAZEPINE 200 MG TAB ACENOCOUMAROL (ACITROM) 4 MG TAB	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	mg m	1 x od	After Meal	E V V V E E E E E E D D V V V D E E E E
289 290 291 291 292 293 294 295 296 297 298 299 300 301 302 303 304 305 306 307 308 309 310 311 312	881 885 887 892 893 895 898 900 901 902 903 910 912 919 924 925 926 927 928 930 933 936 939	10926 11722 12329 12331 10119 11987 12327 10826 12325 10706 10541 11205 12213 10570 11127 11955 10538 11028	PREGABLIN 75 MG TRIHEXYPHENIDYL (2MG) TAB CYPROTERONE 2MG + ETHINYL ESTRADIOL 0.035MG IDIANE 351 TAB LORAZEPAM 1 MG TAB LITHIUM CARBONATE 300 MG CAP/TAB INJ LIGNOCAINE 2% WITHOUT ADRENALINE DARBEPOETIN 40MG INJ IMIPRAMINE 25 MG TAB IMATINIB 400MG CAP HYDROXYUREA 500 MG CAP HYDROXYUREA 500 MG CAP HALOPERIDOL 5MG TAB CYCLOSPORIN 100MG TAB CLOBAZAM 5MG TAB PROPRANOLOL 20 MG TAB BANDAGE TRIANGULAR ROLL BANDAGE TRIANGULAR ROLL BANDAGE 10 CM X 4 METRES BANDAGE 10 CM X 4 METRES SYP BACLOFEN 5MG/5ML BACLOFEN 10 MG TAB AMIODARONE 200MG TAB AMIODARONE 200MG TAB ALFACALCIDOL VITAMIN D3 0.25 MCG CAP CARBAMAZEPINE 200 MG TAB ACENOCOUMAROL (ACITROM)4 MG TAB RIBOCICILIB 200MG TAB	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	mg m	1 x od	After Meal	E V V V V E E E E E E E D D V V V D E E E E
289 290 291 291 292 293 294 295 296 297 298 299 300 301 302 303 304 305 306 307 308 309 310 311 312 313	881 885 887 892 893 895 898 900 901 902 903 910 912 919 924 925 926 927 928 930 933 936 939 940	10926 11722 12329 12331 10119 11987 12327 10863 10826 12325 10706 10541 11205 12213 10570 11127 11955 10538 11028 11044 10850	PREGABLIN 75 MG TRIHEXYPHENIDYL (2MG) TAB CYPROTERONE 2MG + ETHINYL ESTRADIOL 0.035MG IDIANE 351 TAB LORAZEPAM 1 MG TAB LITHIUM CARBONATE 300 MG CAP/TAB INJ LIGNOCAINE 2% WITHOUT ADRENALINE DARBEPOETIN 40MG INJ IMIPRAMINE 25 MG TAB IMATINIB 400MG CAP HYDROXYUREA 500 MG CAP HYDROXYUREA 500 MG CAP HALOPERIDOL 5MG TAB CYCLOSPORIN 100MG TAB CLOBAZAM 5MG TAB BANDAGE TRIANGULAR ROLL BANDAGE TRIANGULAR ROLL BANDAGE 10 CM X 4 METRES BANDAGE 2.5CM X 4 METRES BANDAGE 2.5CM X 4 METRES BANDAGE 10 CM X 4 METRES SYP BACLOFEN 5MG/5ML BACLOFEN 10 MG TAB AMIODARONE 200MG TAB ALFACALCIDOL VITAMIN D3 0.25 MCG CAP CARBAMAZEPINE 200 MG TAB RIBOCICILIB 200MG TAB RIBOCICILIB 200MG TAB RIBOCICILIB 200MG TAB RIBOCICILIB 200MG TAB	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	mg m	1 x od	After Meal	E V V V E E E E E E D D V V V D E E E E
289 290 291 291 292 293 294 295 296 297 298 299 300 301 302 303 304 305 306 307 308 309 310 311 312	881 885 887 892 893 895 898 900 901 902 903 910 912 919 924 925 926 927 928 930 933 936 939	10926 11722 12329 12331 10119 11987 12327 10826 12325 10706 10541 11205 12213 10570 11127 11955 10538 11028	PREGABLIN 75 MG TRIHEXYPHENIDYL (2MG) TAB CYPROTERONE 2MG + ETHINYL ESTRADIOL 0.035MG IDIANE 351 TAB LORAZEPAM 1 MG TAB LITHIUM CARBONATE 300 MG CAP/TAB INJ LIGNOCAINE 2% WITHOUT ADRENALINE DARBEPOETIN 40MG INJ IMIPRAMINE 25 MG TAB IMATINIB 400MG CAP HYDROXYUREA 500 MG CAP HYDROXYUREA 500 MG CAP HALOPERIDOL 5MG TAB CYCLOSPORIN 100MG TAB CLOBAZAM 5MG TAB PROPRANOLOL 20 MG TAB BANDAGE TRIANGULAR ROLL BANDAGE TRIANGULAR ROLL BANDAGE 10 CM X 4 METRES BANDAGE 10 CM X 4 METRES SYP BACLOFEN 5MG/5ML BACLOFEN 10 MG TAB AMIODARONE 200MG TAB AMIODARONE 200MG TAB ALFACALCIDOL VITAMIN D3 0.25 MCG CAP CARBAMAZEPINE 200 MG TAB ACENOCOUMAROL (ACITROM)4 MG TAB RIBOCICILIB 200MG TAB	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	mg m	1 x od	After Meal	E V V V V E E E E E E E D D D V V V D E E E D D D D

317	978	13266	AZITHROMYCIN 500 MG TAB	1	mg	1 x od	After Meal	٧
318	980	12319	FLUOXETINE 20MG TAB	1	mg	1 x od	After Meal	E
319	981	12010	NORMAL SALINE	1	mg	1 x od	After Meal	V
320	983		RL FLUID	1	No	SOS	After Meal	V
321	989	13242	CLINDAMYCIN 300 MG CAP	1	mg	1 x od	After Meal	V
322	991	13240	INJ CLARITHROMYCIN 500MG	1	No	sos	After Meal	Е
323	993		CREPE BANDAGE 15CM	1	No	sos	After Meal	٧
324	994		CREPE BANDAGE 10CM	1	No	sos	After Meal	E
325	996	12411	MODAFINIL 100 MG TAB	1	mg	1 x od	After Meal	V
326	999	13246	FURAZOLIDONE 100 MG	1	mg	1 x od	After Meal	D
			(FUROXONE)					
327	1002	11009	INJ ERYTHROPOIETIN RECOMBINANT HUMAN 2000 IU	1	NO	1 x od	After Meal	V
328	1006	16713	INJ DEPO PROVERA(MEDROPXY PROGESTRONE ACETATE)	1	mg	1 x od	After Meal	V
329	1008	13255	NORFLOXACIN 400MG TAB	1	mg	1 x od	After Meal	V
330	1010	12603	DARIFENACIN 7.5 MG TAB	1	mg	1 x od	After Meal	D
331	1016	13294	ZIDOVUDINE 300 MG + LAMIVUDINE 150 MG TAB	1	mg	1 x od	After Meal	V
332	1020		SITAGLIPTIN 50 MG TAB	1	mg	1 x od	After Meal	V
333	1021	10563	LAMOTRIGINE 25 MG TAB	1	mg	1 x od	After Meal	V
334	1023	10644	PYRAZINAMIDE 500MG TAB	1	mg	1 x od	After Meal	V
335	1024	11129	APIXABAN 5MG TAB	1	mg	1 x od	After Meal	V
336 337	1027 1029	11389 12341	TERBINAFINE 250MG TAB CLONAZEPAM 0.25 MG TAB	1	MG	1 x od 1 x od	After Meal After Meal	V
337	1029	12341	QUETIAPINE 25 MG TAB	1	mg mg	1 x od 1 x od	After Meal	V
339	1038	10903	ENTACAPONE 200MG TAB	1	mg	1 x od	After Meal	E
340	1040	12604	(ADCAPONE) DARIFENACIN 15 MG TAB	1	ma	1 x od	After Meal	Е
340	1040	12004	BETADINE OINT	15	mg gm	Local apply once a	After Meal LA	V
341	1041		BETADINE OINT	15	giii	day	LA	•
342	1042	11705	IBANDRONIC ACID 150MG TAB	1	mg	1 x od	After Meal	E
343	1053	10508	CITICOLINE 500MG TAB	1	mg	1 x od	After Meal	Е
344	1054	10000	COTTON 50GM PKT	1	No	sos	After Meal	V
345	1055		COTTON 500GM PKT	1	No	sos	After Meal	V
346	1056	10622	CLOFAZIMINE 100 MG CAP	1	mg	1 x od	After Meal	V
347	1057	12313	CLOMIPRAMINE 25MG TAB	1	mg	1 x od	After Meal	E
348	1060	11725	DANAZOL 100MG TAB	1	mg	1 x od	After Meal	V
349	1061	10624	DAPSONE 50MG TAB	1	mg	1 x od	After Meal	٧
349 350	1061 1064	10624 11743	DAPSONE 50MG TAB ISOXSUPRINE 10MG TAB	1	mg mg	1 x od 1 x od	After Meal After Meal	V D
349 350 351	1061 1064 1065	10624 11743 12062	DAPSONE 50MG TAB ISOXSUPRINE 10MG TAB ED ATROPINE	1 1 5	mg mg ml	1 x od 1 x od 1 Drop twice a day	After Meal After Meal After Meal	V D V
349 350 351 352	1061 1064 1065 1069	10624 11743 12062 12017	DAPSONE 50MG TAB ISOXSUPRINE 10MG TAB ED ATROPINE ED HOMATROPINE 2% W/V)	1 1 5 5	mg mg ml ml	1 x od 1 x od 1 Drop twice a day 1 Drop twice a day	After Meal After Meal After Meal 120187	V D V
349 350 351	1061 1064 1065	10624 11743 12062	DAPSONE 50MG TAB ISOXSUPRINE 10MG TAB ED ATROPINE	1 1 5	mg mg ml	1 x od 1 x od 1 Drop twice a day	After Meal After Meal After Meal	V D V
349 350 351 352	1061 1064 1065 1069	10624 11743 12062 12017	DAPSONE 50MG TAB ISOXSUPRINE 10MG TAB ED ATROPINE ED HOMATROPINE 2% W/V) ED PYRIMON (CHLORAMPHENICOL 1% W/V)	1 1 5 5	mg mg ml ml	1 x od 1 x od 1 Drop twice a day 1 Drop twice a day	After Meal After Meal After Meal 120187	V D V
349 350 351 352 353	1061 1064 1065 1069 1070 1071	10624 11743 12062 12017 12004	DAPSONE 50MG TAB ISOXSUPRINE 10MG TAB ED ATROPINE ED HOMATROPINE 2% W/V) ED PYRIMON (CHLORAMPHENICOL 1% W/V + DEXAMETHASONE 0.1% W/V ETOPOSIDE 50 MG CAP R G PAD 10CM*20CM	1 1 5 5 5	mg mg ml ml	1 x od 1 x od 1 prop twice a day 1 Drop twice a day 1 Drop twice a day 1 Drop twice a day 1 x od 1 x od 1 x od	After Meal After Meal After Meal 120187 After Meal After Meal After Meal After Meal	V D V V
349 350 351 352 353 354 355 356	1061 1064 1065 1069 1070 1071 1074 1075	10624 11743 12062 12017 12004	DAPSONE 50MG TAB ISOXSUPRINE 10MG TAB ED ATROPINE ED HOMATROPINE 2% W/V) ED PYRIMON (CHLORAMPHENICOL 1% W/V + DEXAMETHASONE 0.1% W/V ETOPOSIDE 50 MG CAP R G PAD 10CM*20CM GAUGE PIECES	1 1 5 5 5 5	mg mg ml ml ml	1 x od 1 x od 1 Drop twice a day 1 x od 1 x od 1 x od 1 x od	After Meal After Meal After Meal 120187 After Meal After Meal After Meal After Meal After Meal	V D V V V V E V
349 350 351 352 353 354 355 356 357	1061 1064 1065 1069 1070 1071 1074 1075 1078	10624 11743 12062 12017 12004	DAPSONE 50MG TAB ISOXSUPRINE 10MG TAB ED ATROPINE ED HOMATROPINE 2% W/V) ED PYRIMON (CHLORAMPHENICOL 1% W/V + DEXAMETHASONE 0.1% W/V ETOPOSIDE 50 MG CAP R G PAD 10CM*20CM GAUGE PIECES HDL KIT	1 1 5 5 5 5	mg mg ml ml ml ml	1 x od 1 x od 1 Drop twice a day 1 x od	After Meal After Meal After Meal 120187 After Meal After Meal After Meal After Meal After Meal After Meal After Meal	V D V V V
349 350 351 352 353 354 355 356 357 358	1061 1064 1065 1069 1070 1071 1071 1074 1075 1078	10624 11743 12062 12017 12004 10820	DAPSONE 50MG TAB ISOXSUPRINE 10MG TAB ED ATROPINE ED HOMATROPINE 2% W/V) ED PYRIMON (CHLORAMPHENICOL 1% W/V + DEXAMETHASONE 0.1% W/V ETOPOSIDE 50 MG CAP R G PAD 10CM*20CM GAUGE PIECES HDL KIT INJ ALBUMIN 20%	1 1 5 5 5 5 1 1 1 1	mg mg ml ml ml	1 x od 1 x od 1 Drop twice a day 1 x od 5 x od	After Meal After Meal After Meal 120187 After Meal After Meal After Meal After Meal After Meal After Meal After Meal After Meal After Meal After Meal	V D V V V E E E
349 350 351 352 353 354 355 356 357 358 359	1061 1064 1065 1069 1070 1071 1074 1075 1078 1079	10624 11743 12062 12017 12004	DAPSONE 50MG TAB ISOXSUPRINE 10MG TAB ED ATROPINE ED HOMATROPINE 2% W/V) ED PYRIMON (CHLORAMPHENICOL 1% W/V + DEXAMETHASONE 0.1% W/V ETOPOSIDE 50 MG CAP R G PAD 10CM*20CM GAUGE PIECES HDL KIT INJ ALBUMIN 20% IVABRADINE 5 MG TAB	1 1 5 5 5 5 1 1 1 1 1	mg mg ml ml ml ml No No No No mg	1 x od 1 x od 1 Drop twice a day 1 x od	After Meal After Meal After Meal 120187 After Meal	V D V V V E E E E
349 350 351 352 353 354 355 356 357 358 359 360	1061 1064 1065 1069 1070 1071 1074 1075 1078 1079 1080 1089	10624 11743 12062 12017 12004 10820 11611 11154	DAPSONE 50MG TAB ISOXSUPRINE 10MG TAB ED ATROPINE ED HOMATROPINE 2% W/V) ED PYRIMON (CHLORAMPHENICOL 1% W/V + DEXAMETHASONE 0.1% W/V ETOPOSIDE 50 MG CAP R G PAD 10CM*20CM GAUGE PIECES HOL KIT INJ ALBUMIN 20% IVABRADINE 5 MG TAB PLASTER ADHESIVE (ZINCOXIDE) 7.5CM X 5MTR	1 5 5 5 5 1 1 1 1 1 1	mg mg ml ml ml ml ml No	1 x od 1 x od 1 Drop twice a day 1 x od 1 x od 1 x od 1 x od 5 x od	After Meal After Meal After Meal 120187 After Meal After Meal After Meal After Meal After Meal After Meal After Meal After Meal After Meal After Meal After Meal After Meal After Meal After Meal LA	V D V V V E E E E
349 350 351 352 353 354 355 356 357 358 359 360	1061 1064 1065 1069 1070 1071 1074 1075 1078 1079 1080 1089	10624 11743 12062 12017 12004 10820 11611 11154	DAPSONE 50MG TAB ISOXSUPRINE 10MG TAB ED ATROPINE ED HOMATROPINE 2% W/V) ED PYRIMON (CHLORAMPHENICOL 1% W/V + DEXAMETHASONE 0.1% W/V ETOPOSIDE 50 MG CAP R G PAD 10CM*20CM GAUGE PIECES HDL KIT INJ ALBUMIN 20% IVABRADINE 5 MG TAB PLASTER ADHESIVE (ZINC-OXIDE) 7.5CM X 5MTR TACROLIMUS 1 MG TAB	1 1 5 5 5 5 1 1 1 1 1 1 1	mg mg ml ml ml ml No No No No mg No	1 x od 1 x od 1 Drop twice a day 1 x od 1 x od 1 x od 1 x od 5 x od	After Meal After Meal After Meal 120187 After Meal After Meal After Meal After Meal After Meal After Meal After Meal After Meal After Meal After Meal After Meal After Meal After Meal LA	V D V V V E E E E V V
349 350 351 352 353 354 355 356 357 358 359 360	1061 1064 1065 1069 1070 1071 1074 1075 1078 1079 1080 1089	10624 11743 12062 12017 12004 10820 11611 11154	DAPSONE 50MG TAB ISOXSUPRINE 10MG TAB ED ATROPINE ED HOMATROPINE 2% W/V) ED PYRIMON (CHLORAMPHENICOL 1% W/V + DEXAMETHASONE 0.1% W/V ETOPOSIDE 50 MG CAP R G PAD 10CM*20CM GAUGE PIECES HDL KIT INJ ALBUMIN 20% IVABRADINE 5 MG TAB PLASTER ADHESIVE (ZINC- OXIDE) 7.5CM X 5MTR TACROLIMUS 1 MG TAB TENOFOVIR 300 MG TAB	1 1 5 5 5 5 1 1 1 1 1 1 1	mg mg ml ml ml ml No No No No mg No	1 x od 1 x od 1 prop twice a day 1 Drop twice a day 1 Drop twice a day 1 Drop twice a day 1 x od 1 x od 1 x od 1 x od 5 x x od 1 x od 5 x x x od 5 x x x od 5 x x x x x x x x x x x x x x x x x x x	After Meal After Meal After Meal 120187 After Meal LA	V D V V V E V E E E V V V V V V V V V V
349 350 351 352 353 353 355 356 357 358 359 360 361 362 363	1061 1064 1065 1069 1070 1071 1074 1075 1078 1079 1080 1089	10624 11743 12062 12017 12004 10820 11611 11154 11979 11624 13602	DAPSONE 50MG TAB ISOXSUPRINE 10MG TAB ED ATROPINE ED HOMATROPINE 2% W/V) ED PYRIMON (CHLORAMPHENICOL 1% W/V + DEXAMETHASONE 0.1% W/V ETOPOSIDE 50 MG CAP R G PAD 10CM*20CM GAUGE PIECES HDL KIT INJ ALBUMIN 20% IVABRADINE 5 MG TAB PLASTER ADHESIVE (ZINC-OXIDE) 7.5CM X 5MTR TACROLIMUS 1 MG TAB TENOFOVIR 300 MG TAB DAPAGLIFLOZIN 10 MG TAB	1 1 5 5 5 5 1 1 1 1 1 1 1 1 1	mg mg ml ml ml ml No No No No mg No mg ng	1 x od 1 x od 1 r od 1 Drop twice a day 1 x od 5 sos 1 x od 5 sos 1 x od	After Meal After Meal After Meal 120187 After Meal LA	V V V V E E E E E V V V V V V V V V V V
349 350 351 352 353 354 355 356 357 358 359 360	1061 1064 1065 1069 1070 1071 1074 1075 1078 1079 1080 1089	10624 11743 12062 12017 12004 10820 11611 11154	DAPSONE 50MG TAB ISOXSUPRINE 10MG TAB ED ATROPINE ED HOMATROPINE 2% W/V) ED PYRIMON (CHLORAMPHENICOL 1% W/V + DEXAMETHASONE 0.1% W/V ETOPOSIDE 50 MG CAP R G PAD 10CM*20CM GAUGE PIECES HOL KIT INJ ALBUMIN 20% IVABRADINE 5 MG TAB PLASTER ADHESIVE (ZINC-OXIDE) 7.5CM X 5MTR TACROLIMUS 1 MG TAB TENOFOVIR 300 MG TAB DAPAGLIFLOZIN 10 MG TAB DIVALPROEX 500 MG TAB RIFAMPICIN 450+ISONIAZID	1 1 5 5 5 5 1 1 1 1 1 1 1	mg mg ml ml ml ml No No No No mg No	1 x od 1 x od 1 prop twice a day 1 Drop twice a day 1 Drop twice a day 1 Drop twice a day 1 x od 1 x od 1 x od 1 x od 5 x x od 1 x od 5 x x x od 5 x x x od 5 x x x x x x x x x x x x x x x x x x x	After Meal After Meal After Meal 120187 After Meal LA	V D V V V E V E E E V V V V V V V V V V
349 350 351 352 353 353 355 356 357 358 359 360 361 362 363 364 364	1061 1064 1065 1069 1070 1071 1074 1075 1078 1079 1080 1089 1092 1100 1101 1103 1105	10624 11743 12062 12017 12004 10820 11611 11154 11979 11624 13602 10526 10636	DAPSONE 50MG TAB ISOXSUPRINE 10MG TAB ED ATROPINE ED HOMATROPINE 2% W/V) ED PYRIMON (CHLORAMPHENICOL 1% W/V + DEXAMETHASONE 0.1% W/V ETOPOSIDE 50 MG CAP R G PAD 10CM*20CM GAUGE PIECES HDL KIT INJ ALBUMIN 20% IVABRADINE 5 MG TAB PLASTER ADHESIVE (ZINC-OXIDE) 7.5CM X 5MTR TACROLIMUS 1 MG TAB TENOFOVIR 300 MG TAB DAPAGLIFLOZIN 10 MG TAB DIVALPROEX 500 MG TAB RIFAMPICIN 450+ISONIAZID 300 MG CAP	1 1 5 5 5 5 1 1 1 1 1 1 1 1 1 1 1 1 1 1	mg mg ml ml ml ml No No No No mg No mg mg mg mg mg	1 x od 1 x od 1 x od 1 Drop twice a day 1 x od 1 x od 1 x od 1 x od 5 cos 1 x od 5 cos 1 x od	After Meal After Meal After Meal 120187 After Meal	V D V V V E E E C V V V V V V V V V V V V V
349 350 351 352 353 353 355 356 357 358 359 360 361 362 363 364 365	1061 1064 1065 1069 1070 1071 1074 1075 1078 1089 1089 1092 1100 1101 1103 1105	10624 11743 12062 12017 12004 10820 11611 11154 11979 11624 13602 10526 10636	DAPSONE 50MG TAB ISOXSUPRINE 10MG TAB ED ATROPINE ED HOMATROPINE 2% W/V) ED PYRIMON (CHLORAMPHENICOL 1% W/V + DEXAMETHASONE 0.1% W/V ETOPOSIDE 50 MG CAP R G PAD 10CM*20CM GAUGE PIECES HDL KIT INJ ALBUMIN 20% IVABRADINE 5 MG TAB PLASTER ADHESIVE (ZINC-OXIDE) 7.5CM X 5MTR TACROLIMUS 1 MG TAB TENOFOVIR 300 MG TAB DIVALPROEX 500 MG TAB DIVALPROEX 500 MG TAB RIFAMPICIN 450+ISONIAZID 300 MG CAP ED DORZOLAMIDE 2%W/V	1 1 5 5 5 5 1 1 1 1 1 1 1 1 1 1 1 1 1 1	mg mg ml ml ml ml ml No No No No mg No mg mg mg mg mg mg mg	1 x od 1 x od 1 x od 1 Drop twice a day 1 x od 1 x od 1 x od 1 x od 5 x x od 5 x x od 1 x od	After Meal After Meal After Meal 120187 After Meal LA After Meal	V D V V E E E E E V V V D D V V E E V V E E E E
349 350 351 352 353 353 355 356 357 358 360 361 362 363 364 365	1061 1064 1065 1069 1070 1071 1074 1075 1078 1079 1080 1089 1092 1100 1101 1103 1105	10624 11743 12062 12017 12004 10820 11611 11154 11979 11624 13602 10526 10636 12032 11963	DAPSONE 50MG TAB ISOXSUPRINE 10MG TAB ED ATROPINE ED HOMATROPINE 2% W/V) ED PYRIMON (CHLORAMPHENICOL 1% W/V + DEXAMETHASONE 0.1% W/V ETOPOSIDE 50 MG CAP R G PAD 10CM*20CM GAUGE PIECES HDL KIT INJ ALBUMIN 20% IVABRADINE 5 MG TAB PLASTER ADHESIVE (ZINC-OXIDE) 7.5CM X 5MTR TACROLIMUS 1 MG TAB DAPAGLIFLOZIN 10 MG TAB DIVALPROEX 500 MG TAB RIFAMPICIN 450+ISONIAZID 300 MG CAP ED DORZOLAMIDE 2%W/V CALCIUM ACETATE 500 MG TAB	1 1 5 5 5 5 5 1 1 1 1 1 1 1 1 1 1 1 1 1	mg mg ml ml ml ml ml No No No No mg mg mg mg mg mg mg mg	1 x od 1 x od 1 x od 1 Drop twice a day 1 x od 1 x od 1 x od 1 x od 5 x os 1 x od	After Meal After Meal After Meal 120187 After Meal LA After Meal	V D V V E E E C V V V V E E E E E E E E E E
349 350 351 352 353 353 356 356 357 360 361 362 363 364 365 366 367	1061 1064 1065 1069 1070 1071 1074 1075 1078 1089 1089 1092 1100 1101 1103 1105 1115 1122	10624 11743 12062 12017 12004 10820 11611 11154 11979 11624 13602 10526 10636	DAPSONE 50MG TAB ISOXSUPRINE 10MG TAB ED ATROPINE ED HOMATROPINE 2% W/V) ED PYRIMON (CHLORAMPHENICOL 1% W/V + DEXAMETHASONE 0.1% W/V ETOPOSIDE 50 MG CAP R G PAD 10CM*20CM GAUGE PIECES HDL KIT INJ ALBUMIN 20% IVABRADINE 5 MG TAB PLASTER ADHESIVE (ZINC-OXIDE) 7.5CM X 5MTR TACROLIMUS 1 MG TAB TENOFOVIR 300 MG TAB DIVALPROEX 500 MG TAB RIFAMPICIN 450+ISONIAZID 300 MG CAP ED DORZOLAMIDE 2%W/V CALCIUM ACETATE 500 MG TAB ED CIPROFLOXACIN + DEXAMETHASONE	1 1 5 5 5 5 1 1 1 1 1 1 1 1 1 1 1 1 1 1	mg mg ml	1 x od 1 x od 1 x od 1 Drop twice a day 1 x od 1 x od 1 x od 5 x od 5 x od 1 x od	After Meal After Meal After Meal After Meal 120187 After Meal LA After Meal LA After Meal LA	V D V V E E E C V V V V V V V V V V V V V V
349 350 351 352 353 353 354 355 356 357 358 369 361 362 363 364 365 366 367	1061 1064 1065 1069 1070 1071 1074 1075 1078 1079 1080 1089 1092 1100 1101 1103 1105 1115 1122	10624 11743 12062 12017 12004 10820 11611 11154 11979 11624 13602 10526 10636 12032 11963	DAPSONE 50MG TAB ISOXSUPRINE 10MG TAB ED ATROPINE ED HOMATROPINE 2% W/V) ED PYRIMON (CHLORAMPHENICOL 1% W/V + DEXAMETHASONE 0.1% W/V ETOPOSIDE 50 MG CAP R G PAD 10CM*20CM GAUGE PIECES HDL KIT INJ ALBUMIN 20% IVABRADINE 5 MG TAB PLASTER ADHESIVE (ZINC-OXIDE) 7.5CM X 5MTR TACROLIMUS 1 MG TAB DAPAGLIFLOZIN 10 MG TAB DIVALPROEX 500 MG TAB RIFAMPICIN 450+ISONIAZID 300 MG CAP ED DORZOLAMIDE 2%W/V CALCIUM ACETATE 500 MG TAB ED CIPROFLOXACIN + DEXAMETHASONE CHLORTHALIDONE 12.5MG TAB	1 1 5 5 5 5 5 1 1 1 1 1 1 1 1 1 1 1 1 1	mg mg ml	1 x od 1 x od 1 x od 1 Drop twice a day 1 x od 1 x od 1 x od 1 x od 5 x od 5 x od 1 x od	After Meal After Meal After Meal 120187 After Meal 120187 After Meal LA After Meal After Meal After Meal LA After Meal LA After Meal	V D V V E E E E V V V V V V V V V V V V
349 350 351 352 353 353 355 356 357 358 359 360 361 362 363 364 365	1061 1064 1065 1069 1070 1071 1074 1075 1078 1079 1080 1089 1092 1100 1101 1103 1105 1115 1122 1124	10624 11743 12062 12017 12004 10820 11611 11154 11979 11624 13602 10526 10636 12032 11963	DAPSONE 50MG TAB ISOXSUPRINE 10MG TAB ED ATROPINE ED HOMATROPINE 2% W/V) ED PYRIMON (CHLORAMPHENICOL 1% W/V + DEXAMETHASONE 0.1% W/V ETOPOSIDE 50 MG CAP R G PAD 10CM*20CM GAUGE PIECES HDL KIT INJ ALBUMIN 20% IVABRADINE 5 MG TAB PLASTER ADHESIVE (ZINC-OXIDE) 7.5CM X 5MTR TACROLIMUS 1 MG TAB DAPAGLIFLOZIN 10 MG TAB DIVALPROEX 500 MG TAB RIFAMPICIN 450+ISONIAZID 300 MG CAP ED DORZOLAMIDE 2%W/V CALCIUM ACETATE 500 MG TAB ED CIPROFLOXACIN + DEXAMETHASONE CHLORTHALIDONE 12.5MG TAB CHOLESTEROL KIT	1 1 5 5 5 5 5 1 1 1 1 1 1 1 1 1 1 1 1 1	mg mg ml	1 x od 1 x od 1 x od 1 Drop twice a day 1 x od 1 x od 1 x od 1 x od 5 x os 1 x od	After Meal After Meal After Meal 120187 After Meal 120187 After Meal LA After Meal After Meal After Meal After Meal LA After Meal Sos	V
349 350 351 352 353 353 356 356 357 360 361 362 363 364 365 366 367 368 369	1061 1064 1065 1069 1070 1071 1074 1075 1078 1080 1089 1092 1100 1101 1103 1105 1115 1122 1124 1131	10624 11743 12062 12017 12004 10820 11611 11154 11979 11624 13602 10526 10636 12032 11963 12009	DAPSONE 50MG TAB ISOXSUPRINE 10MG TAB ED ATROPINE ED HOMATROPINE 2% W/V) ED PYRIMON (CHLORAMPHENICOL 1% W/V + DEXAMETHASONE 0.1% W/V ETOPOSIDE 50 MG CAP R G PAD 10CM*20CM GAUGE PIECES HDL KIT INJ ALBUMIN 20% IVABRADINE 5 MG TAB PLASTER ADHESIVE (ZINC-OXIDE) 7.5CM X 5MTR TACROLIMUS 1 MG TAB DAPAGLIFLOZIN 10 MG TAB DIVALPROEX 500 MG TAB RIFAMPICIN 450+ISONIAZID 300 MG CAP ED DORZOLAMIDE 2%W/V CALCIUM ACETATE 500 MG TAB ED CIPROFLOXACIN + DEXAMETHASONE CHLORTHALIDONE 12.5MG TAB CHOLESTEROL KIT COLOSTOMY BAG 6820	1 1 5 5 5 5 1 1 1 1 1 1 1 1 1 1 1 1 1 1	mg mg ml	1 x od 1 x od 1 x od 1 Drop twice a day 1 x od 1 x od 1 x od 5 x x od 1 x od	After Meal After Meal After Meal After Meal 120187 After Meal LA After Meal Sossos	V V V V V V V V V V V V V V V V V V V
349 350 351 352 353 353 353 356 357 358 359 360 361 362 363 364 365 366 367 368 369 370 371	1061 1064 1065 1069 1070 1071 1074 1075 1078 1089 1089 1100 1101 1103 1105 1115 1122 1124 1131 1132 1134	10624 11743 12062 12017 12004 10820 11611 11154 11979 11624 13602 10526 10636 12032 11963	DAPSONE 50MG TAB ISOXSUPRINE 10MG TAB ED ATROPINE ED HOMATROPINE 2% W/V) ED PYRIMON (CHLORAMPHENICOL 1% W/V + DEXAMETHASONE 0.1% W/V ETOPOSIDE 50 MG CAP R G PAD 10CM*20CM GAUGE PIECES HDL KIT INJ ALBUMIN 20% IVABRADINE 5 MG TAB PLASTER ADHESIVE (ZINC-OXIDE) 7.5CM X 5MTR TACROLIMUS 1 MG TAB DAPAGLIFLOZIN 10 MG TAB DIVALPROEX 500 MG TAB RIFAMPICIN 450+ISONIAZID 300 MG CAP ED DORZOLAMIDE 2%W/V CALCIUM ACETATE 500 MG TAB ED CIPROFLOXACIN + DEXAMETHASONE CHLORTHALIDONE 12.5MG TAB CHOLESTEROL KIT COLOSTOMY BAG 6820 BISOPROLOL 2.5MG TAB	1 1 5 5 5 5 1 1 1 1 1 1 1 1 1 1 1 1 1 1	mg mg ml	1 x od 1 x od 1 x od 1 Drop twice a day 1 Drop twice a day 1 Drop twice a day 1 x od 1 x od 1 x od 1 x od 5 x od 1 x od	After Meal After Meal After Meal After Meal 120187 After Meal LA After Meal SOS SOS After Meal	V
349 350 351 352 353 353 353 356 357 358 359 360 361 362 363 364 365 366 367 368 369 370 371 372 373	1061 1064 1065 1069 1070 1071 1074 1075 1078 1079 1080 1089 1092 1100 1101 1103 1105 1115 1122 1124 1131 1132 1134 1137 1138	10624 11743 12062 12017 12004 10820 10820 11611 11154 11979 11624 13602 10526 10636 12032 11963 12009	DAPSONE 50MG TAB ISOXSUPRINE 10MG TAB ED ATROPINE ED HOMATROPINE 2% W/V) ED PYRIMON (CHLORAMPHENICOL 1% W/V + DEXAMETHASONE 0.1% W/V ETOPOSIDE 50 MG CAP R G PAD 10CM*20CM GAUGE PIECES HDL KIT INJ ALBUMIN 20% IVABRADINE 5 MG TAB PLASTER ADHESIVE (ZINC-OXIDE) 7.5CM X 5MTR TACROLIMUS 1 MG TAB DAPAGLIFLOZIN 10 MG TAB DIVALPROEX 500 MG TAB RIFAMPICIN 450+ISONIAZID 300 MG CAP ED DORZOLAMIDE 2%W/V CALCIUM ACETATE 500 MG TAB ED CIPROFLOXACIN + DEXAMETHASONE CHLORTHALIDONE 12.5MG TAB CHOLESTEROL KIT COLOSTOMY BAG 6820 BISOPROLOL 2.5MG TAB CONDOM CATHRETER	1 1 5 5 5 5 1 1 1 1 1 1 1 1 1 1 1 1 1 1	mg mg ml	1 x od 1 x od 1 x od 1 Drop twice a day 1 Drop twice a day 1 Drop twice a day 1 x od 5 x od 1 x od 2 x od 3 x od 3 x od 3 x od 3 x od 5 x os	After Meal After Meal After Meal After Meal 120187 After Meal LA After Meal After Meal LA After Meal LA After Meal LA After Meal LA After Meal LA After Meal	V D V V E E E C V V V V C E E E C V V V V C C C C
349 350 351 352 353 353 354 355 356 357 358 360 361 362 363 364 365 366 367 368 369 370 371 372 373	1061 1064 1065 1069 1070 1071 1074 1075 1078 1079 1080 1089 1092 1100 1101 1103 1105 1115 1122 1124 1131 1132 1134 1137 1138 1139	10624 11743 12062 12017 12004 10820 10820 11611 11154 11979 11624 13602 10526 10636 12032 11963 12009	DAPSONE 50MG TAB ISOXSUPRINE 10MG TAB ED ATROPINE ED HOMATROPINE 2% W/V) ED PYRIMON (CHLORAMPHENICOL 1% W/V + DEXAMETHASONE 0.1% W/V ETOPOSIDE 50 MG CAP R G PAD 10CM*20CM GAUGE PIECES HDL KIT INJ ALBUMIN 20% IVABRADINE 5 MG TAB PLASTER ADHESIVE (ZINC-OXIDE) 7.5CM X 5MTR TACROLIMUS 1 MG TAB DAPAGLIFLOZIN 10 MG TAB DIVALPROEX 500 MG TAB RIFAMPICIN 450+ISONIAZID 300 MG CAP ED DORZOLAMIDE 2%W/V CALCIUM ACETATE 500 MG TAB ED CIPROFLOXACIN + DEXAMETHASONE CHLORTHALIDONE 12.5MG TAB CHOLESTEROL KIT COLOSTOMY BAG 6820 BISOPROLOL 2.5MG TAB CONDOM CATHRETER COUGH LOZENGES	1 1 5 5 5 5 5 1 1 1 1 1 1 1 1 1 1 1 1 1	mg mg ml	1 x od 1 x od 1 prop twice a day 1 Drop twice a day 1 Drop twice a day 1 Drop twice a day 1 x od 1 x od 1 x od 1 x od 5 x od 1 x od	After Meal After Meal After Meal 120187 After Meal 120187 After Meal LA After Meal After Meal LA After Meal LA After Meal LA After Meal LA After Meal LA After Meal Anytime	V
349 350 351 352 353 355 356 357 358 359 360 361 362 363 364 365 366 367 368 369 370 371 372 373 374 375	1061 1064 1065 1069 1070 1070 1071 1074 1075 1079 1080 1089 1092 1100 1101 1103 1105 1115 1122 1124 1131 1132 1134 1137 1138 1139 1142	10624 11743 12062 12017 12004 10820 10820 11611 11154 11979 11624 13602 10526 10636 12032 11963 12009	DAPSONE 50MG TAB ISOXSUPRINE 10MG TAB ED ATROPINE ED HOMATROPINE 25 WVV) ED PYRIMON (CHLORAMPHENICOL 1% WVV + DEXAMETHASONE 0.1% WVV + DEXAMETHASONE 0.1% WVV ETOPOSIDE 50 MG CAP R G PAD 10CM*20CM GAUGE PIECES HDL KIT INJ ALBUMIN 20% IVABRADINE 5 MG TAB PLASTER ADHESIVE (ZINC-OXIDE) 7.5CM X 5MTR TACROLIMUS 1 MG TAB DIVALPROEX 500 MG TAB DIVALPROEX 500 MG TAB DIVALPROEX 500 MG TAB RIFAMPICIN 450+ISONIAZID 300 MG CAP ED DORZOLAMIDE 2%WVV CALCIUM ACETATE 500 MG TAB ED CIPROFLOXACIN + DEXAMETHASONE CHLORTHALIDONE 12.5MG TAB CHOLESTEROL KIT COLOSTOMY BAG 6820 BISOPROLOL 2.5MG TAB COUGH LOZENGES CYCLOSPORINE 25MG TAB	1 1 5 5 5 5 1 1 1 1 1 1 1 1 1 1 1 1 1 1	mg mg mg ml	1 x od 1 x od 1 x od 1 Drop twice a day 1 x od 1 x od 1 x od 5 x x od 1 x od	After Meal After Meal After Meal After Meal 120187 After Meal LA After Meal LA After Meal LA After Meal	V D V V E E E C V V V C E E E C C V V C C C C
349 350 351 352 353 353 353 355 356 357 358 359 360 361 362 363 364 365 366 367 368 369 370 371 372 373 374 375 376	1061 1064 1065 1069 1070 1071 1074 1075 1078 1089 1089 1100 1101 1103 1105 1115 1122 1124 1131 1132 1134 1137 1138 1139 1142 1143	10624 11743 12062 12017 12004 10820 10820 11611 11154 11979 11624 13602 10526 10636 12032 11963 12009	DAPSONE 50MG TAB ISOXSUPRINE 10MG TAB ED ATROPINE ED HOMATROPINE 2% W/V) ED PYRIMON (CHLORAMPHENICOL 1% W/V + DEXAMETHASONE 0.1% W/V ETOPOSIDE 50 MG CAP R G PAD 10CM*20CM GAUGE PIECES HDL KIT INJ ALBUMIN 20% IVABRADINE 5 MG TAB PLASTER ADHESIVE (ZINC-OXIDE) 7.5CM X 5MTR TACROLIMUS 1 MG TAB DAPAGLIFLOZIN 10 MG TAB DIVALPROEX 500 MG TAB RIFAMPICIN 450+ISONIAZID 300 MG CAP ED DORZOLAMIDE 2%W/V CALCIUM ACETATE 500 MG TAB ED CIPROFLOXACIN + DEXAMETHASONE CHLORTHALIDONE 12.5MG TAB CHOLESTEROL KIT COLOSTOMY BAG 6820 BISOPROLOL 2.5MG TAB CONDOM CATHRETER COUGH LOZENGES CYCLOSPORINE 25MG TAB INJ METOCLOPRAMIDE (5MG/ML)	1 1 5 5 5 5 1 1 1 1 1 1 1 1 1 1 1 1 1 1	mg mg mg ml	1 x od 1 x od 1 x od 1 Drop twice a day 1 Drop twice a day 1 Drop twice a day 1 x od 5 x od 1 x od	After Meal After Meal After Meal After Meal 120187 After Meal LA After Meal LA After Meal LA After Meal	V D V V E E E D V V E E E D D V C E E E D D C C E E E D D C C E E E D C C E E E D C C E E E D C C E E E E
349 350 351 352 353 355 356 357 358 359 360 361 362 363 364 365 366 367 368 369 370 371 372 373 374 375	1061 1064 1065 1069 1070 1070 1071 1074 1075 1079 1080 1089 1092 1100 1101 1103 1105 1115 1122 1124 1131 1132 1134 1137 1138 1139 1142	10624 11743 12062 12017 12004 10820 10820 11611 11154 11979 11624 13602 10526 10636 12032 11963 12009	DAPSONE 50MG TAB ISOXSUPRINE 10MG TAB ED ATROPINE ED HOMATROPINE 25 W/V) ED PYRIMON (CHLORAMPHENICOL 1% W/V + DEXAMETHASONE 0.1% W/V ETOPOSIDE 50 MG CAP R G PAD 10CM*20CM GAUGE PIECES HDL KIT INJ ALBUMIN 20% IVABRADINE 5 MG TAB PLASTER ADHESIVE (ZINC-OXIDE) 7.5CM X 5MTR TACROLIMUS 1 MG TAB DAPAGLIFLOZIN 10 MG TAB DIVALPROEX 500 MG TAB RIFAMPICIN 450+ISONIAZID 300 MG CAP ED DORZOLAMIDE 2%W/V CALCIUM ACETATE 500 MG TAB ED CIPROFLOXACIN + DEXAMETHASONE CHLORTHALIDONE 12.5MG TAB CHOLESTEROL KIT COLOSTOMY BAG 6820 BISOPROLOL 2.5MG TAB CONDOM CATHRETER COUGH LOZENGES CYCLOSPORINE 25MG TAB INJ METOCLOPRAMIDE	1 1 5 5 5 5 1 1 1 1 1 1 1 1 1 1 1 1 1 1	mg mg mg ml	1 x od 1 x od 1 x od 1 Drop twice a day 1 x od 1 x od 1 x od 5 x x od 1 x od	After Meal After Meal After Meal After Meal 120187 After Meal LA After Meal LA After Meal LA After Meal	V D V V E E E C V V V C E E E C C V V C C C C

		1						
379	1160		IRRIGATION SET	1	No	sos	SOS	V
380	1162		IV SET	1	No	sos	sos	V
381	1164		OINT MICONAZOLE	15	gm	Local apply once a	LA	D
						day		
382	1165		IV SET MICRO	1	No	sos	SOS	V
383	1172		KNEE CAPS SIZE XXL	1	No	sos	SOS	Ē
384	1177		DIVALPROEX 250 MG TAB	1	mg	1 x od	After Meal	D
385	1185	10537	OXCARBAZEPINE 300MG TAB	1	mg	1 x od	After Meal	V
386	1186	12345	DOTHIEPIN 75 MG TAB	1	mg		After Meal	V
387	1192	11736	ETHINYL ESTRADIOL 0.01	1	mg		After Meal	V
307	1132	11730		•	ilig		Aitei Weai	•
			MG(LYNORAL)					
388	1193		DRESSING SET	1	No		SOS	V
389	1195		MALE CATHRETER	1	No		sos	V
390	1204		ECG GEL	1	No	sos	LA	V
391	1206		ECG ROLL	1	No	sos	SOS	V
		40047		1		903		v
392	1208	12347	PROMETHAZINE (PHENARGAN	1	mg		After Meal	V
) 25 MG TAB					
393	1215	12955	METHYLPREDNISOLONE 4MG	1	mg		After Meal	V
			TAB					
394	1219	10516	PIRACETAM 400 MG TAB	1	mg	1 x od	After Meal	D
395	1233	12302	BUPROPION 150 MG TAB	1	mg		After Meal	V
		12302					Aiter Wear	
396	1236		MICROPORE 2	null	1			D
397	1242	12107	MOMETASONE NASAL SPRAY	10	ML	1 Puff x OD	LA	V
398	1243	10315	MONTELUKAST (MONTAIR) 10	1	mg		After Meal	V
300		.0010	` ` ` ` ` ` ` ` ` ` ` ` ` ` ` ` ` ` ` `		9		tor iniour	
200	4045		MG TAB				A 64 a u 14 1	
399	1245		ESOMEPRAZOLE 40 MG	1	mg		After Meal	V
			(RACIPER) TAB					
400		11511	EPLERENONE 25MG TAB	1	mg		After Meal	D
401	1261	10279	ETORICOXCIB 120MG TAB	1	mg		After Meal	
402	1272	12379	NICOTINE 2MG TAB	1			After Meal	D
					mg	4		V
403	1273	10511	FLUNARIZINE 10 MG TAB	1	mg	1 x od	After Meal	
404	1274		RISPERIDONE 1MG TAB	1	mg		After Meal	V
405	1278	10580	FORMOTEROL (6MCG) +	1	puff		After Meal	V
			BUDESONIDE (200MCG)		•			
			,					
400	4000	44000	INHALER	4			A 54 B 4 I	V
406	1286	11692	OFLOXACIN OZ TAB	1	mg		After Meal	
407	1292	10899	ABIRATERONE 250 MG TAB	1	mg		After Meal	E
408	1300		ROSUVASTATIN 10MG TAB	1	mg		After Meal	V
409	1301		ROSUVASTATIN 20MG TAB	1	mg		After Meal	V
410	1302	10657	ROXITHROMYCIN (150MG) TAB	1			After Meal	<u> </u>
410	1302	10057	ROATTHROWITCIN (150WIG) TAB	'	mg		Alter Wear	
411	1308	12461	SALMETEROL (50MCG) +	1	puff		After Meal	V
			FLUTICASONE PROPIONATE					
			(500MCG) ACCUHALER					
412	1309		SGOT KIT	1	No		After Meal	
-	1309							E
413		12116	PROCHLOROPERAZINE 5MG	1	mg		After Meal	E
			TAB					
414	1317		COMPRESSION STOCKING	1	No	once in a month	After Meal	V
			BELOW KNEE					
415	1320		SURGISCRUB	1	No		After Meal	V
		45040						
416	1322	15819	ERLOTINIB 100 MG (TARCEVA)	1	mg		After Meal	D
			TAB					
417	1328	11086	PENTOXIFYLLINE (400MG)	1	mg		After Meal	D
			TAB (TRENTAL)					
418	1335		UREA KIT	1	Kit	sos	sos	Е
419		11062		1				V
	1337	11962	FLAVOXATE 200MG TAB		mg	1 x od	After Meal	
420	1339		UROBAG	11	No	sos	SOS	V
421	1340		UROBASE PLATE 4265	1	No	sos	SOS	D
422		11510	SACUBITRIL 97MG +	1	mg		After Meal	E
			VALSARTAN 103MG1 TAB		.5			
423	1344	11157		1	ma		After Meal	Е
-		1113/	VERAPAMIL 120MG SR TAB		mg			
424	1347		PCM 250 MG + CAFFEIN 100	1	mg		After Meal	E
			MG +ERGOTAMINE					
			1MG+PROCHLORPERAZINE					
			2.5 (VASOGRAIN) TAB					
425	1366	10893	INJ OMALIZUMAB 150 MG	1	NO	once in a month	After Meal	٧
		10033						V
426	1368		INJ VITAMIN D3 600000IU	1	Amp	once in a month	After Meal	V
			[ARACHITOL]					
427	1370		RYLES TUBE	1	UNIT	sos	After Meal	E
428	1376	10206	INJ FORTWIN [PENTAZOCINE	1	No		After Meal	Е
			30MG1					
400	1204	44750		-	N-		After Med	
429	1381	11758	MAGNESIUM SULPHATE (50%	1	No		After Meal	E
			W/V) INJ					
430	1386	14301	RANOLAZINE 500 MG TAB	1	mg	1 x od	After Meal	V
431	1393		GABAPENTIN 100MG TAB	1	mg		After Meal	V
432	1405	12334	ESCITALOPRAM 5 MG TAB	1	mg		After Meal	V
433	1412	12360	OLANZAPINE 10 MG TAB	1	mg		After Meal	V
434	1413	12361	OLANZAPINE 5 MG TAB	1	mg	1 x od	After Meal	V
435	1415	12348	RISPERIDONE 2 MG TAB	1	mg	1 x od	After Meal	V
436	1417	12377	QUETIAPINE 100 MG TAB	1	mg		After Meal	V
							toi ilioui	

437	1418	10673	METRONIDAZOLE 400 MG TAB	1	unit		After Meal	V
420	1423	11636	OMEDDAZOLE 20 MC CAD	1		1 x od	Before Meal	V
438			OMEPRAZOLE 20 MG CAP ETHIONAMIDE 250 MG TAB	1	mg			D
439	1425	12820			mg	1 x od	After Meal	D
440 441	1426 1428	11781 10291	EMPAGLIFLOZIN 10MG TAB KETOROLAC 10 MG TAB	1	mg	4 v ad	After Meal	D
442	1438	10291	METHYLPREDNISOLONE	1	mg MG	1 x od	After Meal After Meal	V
442	1430		ACETATE 80MG INJ	'	IVIG		Aitei Weai	•
443	1442	11145	NEBIVOLOL 5 MG TAB	1	mg	1 x od	After Meal	Е
444	1447	10925	RASAGILINE 1 MG TAB	1	mg	1 X OU	After Meal	E
444	1448	10925	NEBIVOLOL 2.5 MG TAB	1	mg		After Meal	V
446	1454		AMISULPRIDE 100 MG TAB	1	mg	1 x od	After Meal	D
447	1463		ANTIVIRAL DRUG TEST	1	mg	I X OU	Aitei Meai	D
448	1464		CARDIAC DRUG TEST	1	ml			В
449	1465	12352	ACAMPROSATE CALCIUM 333	1	mg	1 x od	After Meal	D
443	1405	12332	MG TAB		ilig	1 7 00	Aitei Meai	
450	1466		REPASETEST 50MG	1	mg			Е
451	1467		OMLISERTONTEST 50MG	1	mg			Ē
452	1468		AMLOTEST 5.0MG	1	mg			Ē
453	1470		OLSERTEST 100MG	1	mg			E
454	1477	11020	IBRUTINIB 140 MG	1	mg		After Meal	Ē
			TAB(IMBRUVICA)	•	9		7.1.00. 111.00.1	_
455	1485		LORAZEPAM 2.5MG TAB	1	mg		After Meal	V
456	1494	12016	MOXIFLOXACIN ED	1	ml		LA	v
457	1506	11170	INJ ENOXAPARIN 40 MCG	1	pfs		After Meal	V
458	1508	11927	ELTROMBOPAG 50 MG	1	mg		After Meal	E
.50			(REVOLADE) TAB		9		mour	_
459	1511		COLOSTOMY BAG WITH	1	No		After Meal	Е
			FLANGE & CLIP,SIZE-60MM					
			WITH DEODORANT CHARCOL					
			CHAMBER					
460	1518		ELASTIC KNEE SUPPORT	1	No		sos	D
461	1519		TRIGLYCERIDE	1	Kit			E
462	1520		URIC ACID	1	Kit			E
463	1524	10289	ALLOPURINOL 100 MG TAB	1	mg	1 x od	After Meal	V
464	1525	12301	ALPRAZOLAM 0.25 MG TAB	1	mg	1 x od	After Meal	V
465	1527		AMBRISENTAN 5 MG TAB	1	mg	1 x od	After Meal	D
466	1531	12337	AMISULPRIDE 50 MG TAB	1	mg	1 x od	After Meal	D
467	1537		ANKLET	1	No	once in a month	SOS	D
468	1538		ANTACID (CHEWABLE)	1	mg	1 x od	Before Meal	V
			CONTAINING DRIED ALUMINIUM HYDROXIDE IP 250MG MAG HYDROXIDE NF 250MG METHYL POLYSILOXANE 50 MG					
469	1539	11630	ANTACID GEL EACH 5ML CONTAINING DRIED ALUMINIUM HYDROXIDE GEL	400	ml	1 tsp x od	Before Meal	V
			250 MG MAGNESIUM HYDROXIDE 250 MG AND METHYL POLYSILOXANE 50 MG BOTTLE OF 400 ML					
470	1540	11637	PANTOPRAZOLE 40 MG TAB	1	MG	1 x od	Before Meal	V
471	1543		ANTI SERA A	1	NO	sos	After Meal	E
472	1544		ANTI SERA B	1	NO	sos	After Meal	E
473	1545	4000	ANTI SERA D	1	NO	sos	After Meal	E
474	4540	12339	ARIPIPRAZOLE 15 MG TAB	1	NO	1 X OD	AFTER MEAL	V
475	1548	12353	ARIPIPRAZOLE 10 MG TAB	1	mg	1 x od	After Meal	V
476	1549	12702	ASCORBIC ACID 500 MG TAB	1	MG	1 x od	After Meal	D
477	1553	11178	(VIT C) ATENOLOL 50MG + AMLODIPINE 5 MG TAB	1	mg	1 x od	After Meal	V
478	1554	12354	ATOMOXETINE 10 MG TAB	1	mg	1 x od	After Meal	E
479	1557	12104	AZELASTINE 140 MCG + FLUTICASONE 50 MCG NASAL SPRAY (DUONASE)	30	puff	1 Puff x OD	After Meal	V
480	1558	12810	AZELASTINE 140 MCG + FLUTICASONE 27.5 MCG NASAL SPRAY	30	Puff	1 Puff x OD	After Meal	E
481	1564		BAND- AID	1	No	sos	SOS	٧
482	1565		BANDAGE CREPE 10CM	1	No	once in a month	SOS	V
483	1566		BANDAGE CREPE 15CM	1	No	once in a month	SOS	٧
484	1567	12457	BECLOMETHASONE DIPROPIONATE 50 MCG PER DOSE METERED DOSE AEROSOL 200 DOSE UNIT	1	Puff	1 Puff x OD	After Meal	V
			(RECLATE)					
485	1570		BETADINE GARGLES	100	ml	1 tsp x od	LA	E
486	1571	12111	BETAHISTINE (VERTIN) 8 MG	1	mg	1 x od	After Meal	V
			TAB					

487	1577		BIOTIN 5 MG TAB	1	mg	1 x od	After Meal	<u> </u>
488	1578	11678	BISACODYL (DULCOLAX) 5	1	mg	1 x od	After Meal	E
400	4500	40000	MG TAB		NO	4	After Meet	-
489	1580	10932	INJ BOTULINUM TOXIN TYPE	1	NO	1 x od	After Meal	D
400	1583	12092	A VIAL 0F 50 UNITS (BOTOX)	5	ml	1 Drop twice a day	After Meel	V
490 491	1584	10911	ED BRINZOLAMIDE 1% BROMOCRIPTINE 2.5 MG TAB	1	ml	1 Drop twice a day 1 x od	After Meal After Meal	V
491	1587	10579	INH BUDESONIDE 200 MCG	1	mg Puff	1 Puff x OD	After Meal	V
493	1593	12393		1		1 x od	After Meal	V
494	1594	12393	BUPRENORPHINE 2 MG TAB BUSPIRONE HCL 10 MG TAB	1	mg	1 x od	After Meal	E
494	1595	13910		1	mg Patch	SOS	SOS	V
495	1595	13910	BUVALOR (BUPRENORPHINE	ı	Paten	505	303	v
496	1597		PATCH 20 MCG) DICLOFENAC 50 MG +	1	MG	1 x od	After Meal	V
430	1551		SERRATIOPEPTIDASE 10 MG	•	IVIG	1 X Ou	Aitei Weai	•
497	1598	12708	CALCIUM CARBONATE 500MG	1	mg	1 x od	After Meal	Е
431	1550	12700	+D3 (SHELCAL) TAB		ilig	1 X Ou	Aitei Meai	-
498	1603		ESOMEPRAZOLE 40 MG +	1	mg	1 x od	After Meal	Е
430	1000		CLARITHROMYCIN 500 MG +	•	g	1 X Ou	Aitoi Moui	-
			AMOXICILLIN 750 MG (SOMPRAZ) CAP					
499	1605	12465	NINTEDANIB 150 MG CAP	1	mg	1 x od	After Meal	D
500	1608	270146	CAPD FLUID 2.5% (2000ML)	1	NO	sos	SOS	D
501	1000	270140	CARBIDOPA 18.75 +	1	mg	1 x od	After Meal	E
501			LEVODOPA 75 MG +		g	1 X Ou	Aitoi Moui	_
			ENTACAPONE 200 MG TAB					
502	1616		CARBIDOPA 10 MG +	1	mg	1 x od	After Meal	V
002	.5.0		LEVODOPA 100 MG CR TAB		9	1 X 00	Altor Moul	•
			(SYNDOPA CR 110 MG)					
503	1617	10904	CARBIDOPA 25 + LEVODOPA	1	mg	1 x od	After Meal	Е
- 555	.517	10004	250 MG TAB (SYNDOPA 275		9	1 X 00	Altor Moul	_
			MG)					
504	1618		CARBIDOPA 25 MG +	1	mg	1 x od	After Meal	Е
004	10.0		LEVODOPA 100 MG CR TAB	•	9	1 X 0 4	Aitor mour	_
			(SYNDOPA CR 125 MG)					
505	1622	12027	ED CARBOXYMETHYL	5	ml	1 Drop twice a day	After Meal	٧
	.022	12027	CELLULOSE 1% BOTTLE OF 5		••••	1 Drop tilloo a day	Aitor mour	•
			ML					
506	1628	13235	CEFACLOR 500 MG CAP	1	mg	1 x od	After Meal	Е
507	1629	13256	CEFIXIME 200 MG TAB	1	MG	1 x od	Before Meal	V
508	1634	.0200	CERVICAL COLLAR SIZE L	1	No	once in a month	SOS	Ē
509	1635		CERVICAL COLLAR SIZE M	1	No	once in a month	SOS	Е
510	1636		CERVICAL COLLAR S	1	No	once in a month	SOS	Е
511	1637		CHLORHEXIDINE MOUTH	100	ml	1 tsp x od	After Meal	D
			WASH 2% BOTT OF 100 ML			•		
512				1	NO	1 x weekly	After Meal	D
	1640	12721	CHOLECALCIFEROL 60000 IU		140			
	1640	12721	SACHET		140	,		
513	1640	12721 11723		1	mg	1 x od	After Meal	V
513	1640		SACHET	1		•	After Meal	
513 514	1640		SACHET CLOMIPHENE CITRATE 100	1		•	After Meal After Meal	
		11723 11180	SACHET CLOMIPHENE CITRATE 100 MG TAB		mg	1 x od		V
		11723	SACHET CLOMIPHENE CITRATE 100 MG TAB CLONIDINE 100 MCG TAB		mg	1 x od		V
514	1660	11723 11180	SACHET CLOMIPHENE CITRATE 100 MG TAB CLONIDINE 100 MCG TAB (ARKAMINE)	1	mg	1 x od 1 x od	After Meal	v v
514 515	1660 1662	11723 11180 12122	SACHET CLOMIPHENE CITRATE 100 MG TAB CLONIDINE 100 MCG TAB (ARKAMINE) CLOTRIMAZOLE 1% W/V IP+ LIGNOCAINE 2% W/V IP EAR DROP BOTT OF 10ML	1 5	mg mg Bott	1 x od 1 x od 1 Drop twice a day	After Meal After Meal	V V E
514	1660	11723 11180	SACHET CLOMIPHENE CITRATE 100 MG TAB CLONIDINE 100 MCG TAB (ARKAMINE) CLOTRIMAZOLE 1% W/V IP+ LIGNOCAINE 2% W/V IP EAR DROP BOTT OF 10ML CLOTRIMAZOLE CREAM 1%	1	mg	1 x od 1 x od	After Meal	v v
514 515 516	1660 1662 1663	11723 11180 12122 11322	SACHET CLOMIPHENE CITRATE 100 MG TAB CLONIDINE 100 MCG TAB (ARKAMINE) CLOTRIMAZOLE 1% W/V IP+ LIGNOCAINE 2% W/V IP EAR DROP BOTT OF 10ML CLOTRIMAZOLE CREAM 1% TUBE OF 15 GM	1 5 15	mg mg Bott	1 x od 1 x od 1 Drop twice a day Local apply once a	After Meal After Meal LA	V V E
514 515 516 517	1660 1662 1663 1667	11723 11180 12122	SACHET CLOMIPHENE CITRATE 100 MG TAB CLONIDINE 100 MCG TAB (ARKAMINE) CLOTRIMAZOLE 1% W/V IP+ LIGNOCAINE 2% W/V IP EAR DROP BOTT OF 10ML CLOTRIMAZOLE CREAM 1% TUBE OF 15 GM CLOZAPINE 50 MG TAB	1 5 15	mg Bott GM mg	1 x od 1 x od 1 Drop twice a day Local apply once a day 1 x od	After Meal After Meal LA After Meal	V V E E E E
514 515 516	1660 1662 1663	11723 11180 12122 11322	SACHET CLOMIPHENE CITRATE 100 MG TAB CLONIDINE 100 MCG TAB (ARKAMINE) CLOTRIMAZOLE 1% W/V IP+ LIGNOCAINE 2% W/V IP EAR DROP BOTT OF 10ML CLOTRIMAZOLE CREAM 1% TUBE OF 15 GM CLOZAPINE 50 MG TAB COLOSTOMY BAG WITH	1 5 15	mg mg Bott	1 x od 1 x od 1 Drop twice a day Local apply once a	After Meal After Meal LA	V V E
514 515 516 517	1660 1662 1663 1667	11723 11180 12122 11322	SACHET CLOMIPHENE CITRATE 100 MG TAB CLONIDINE 100 MCG TAB (ARKAMINE) CLOTRIMAZOLE 1% W/V IP+ LIGNOCAINE 2% W/V IP EAR DROP BOTT OF 10ML CLOTRIMAZOLE CREAM 1% TUBE OF 15 GM CLOZAPINE 50 MG TAB COLOSTOMY BAG WITH FLANGE AND CLAMP SIZE 50-	1 5 15	mg Bott GM mg	1 x od 1 x od 1 Drop twice a day Local apply once a day 1 x od	After Meal After Meal LA After Meal	V V E E E E
514 515 516 517	1660 1662 1663 1667	11723 11180 12122 11322	SACHET CLOMIPHENE CITRATE 100 MG TAB CLONIDINE 100 MCG TAB (ARKAMINE) CLOTRIMAZOLE 1% W/V IP+ LIGNOCAINE 2% W/V IP EAR DROP BOTT OF 10ML CLOTRIMAZOLE CREAM 1% TUBE OF 15 GM CLOZAPINE 50 MG TAB COLOSTOMY BAG WITH FLANGE AND CLAMP SIZE 50- 57 MM WITH DEODORANT	1 5 15	mg Bott GM mg	1 x od 1 x od 1 Drop twice a day Local apply once a day 1 x od	After Meal After Meal LA After Meal	V V E E E E
514 515 516 517 518	1660 1662 1663 1667 1669	11723 11180 12122 11322	SACHET CLOMIPHENE CITRATE 100 MG TAB CLONIDINE 100 MCG TAB (ARKAMINE) CLOTRIMAZOLE 1% W/V IP+ LIGNOCAINE 2% W/V IP EAR DROP BOTT OF 10ML CLOTRIMAZOLE CREAM 1% TUBE OF 15 GM CLOZAPINE 50 MG TAB COLOSTOMY BAG WITH FLANGE AND CLAMP SIZE 50- 57 MM WITH DEODORANT CHARCOAL CHAMBER	1 5 15 1	mg mg Bott GM mg unit	1 x od 1 x od 1 Drop twice a day Local apply once a day 1 x od 1 x thrice weekly	After Meal After Meal LA After Meal SOS	V V E E E V
514 515 516 517	1660 1662 1663 1667	11723 11180 12122 11322	SACHET CLOMIPHENE CITRATE 100 MG TAB CLONIDINE 100 MCG TAB (ARKAMINE) CLOTRIMAZOLE 1% W/V IP+ LIGNOCAINE 2% W/V IP EAR DROP BOTT OF 10ML CLOTRIMAZOLE CREAM 1% TUBE OF 15 GM CLOZAPINE 50 MG TAB COLOSTOMY BAG WITH FLANGE AND CLAMP SIZE 50- 57 MM WITH DEODORANT CHARCOAL CHAMBER COLOSTOMY BAG WITH	1 5 15	mg Bott GM mg	1 x od 1 x od 1 Drop twice a day Local apply once a day 1 x od	After Meal After Meal LA After Meal	V V E E E E
514 515 516 517 518	1660 1662 1663 1667 1669	11723 11180 12122 11322	SACHET CLOMIPHENE CITRATE 100 MG TAB CLONIDINE 100 MCG TAB (ARKAMINE) CLOTRIMAZOLE 1% W/V IP+ LIGNOCAINE 2% W/V IP EAR DROP BOTT OF 10ML CLOTRIMAZOLE CREAM 1% TUBE OF 15 GM CLOZAPINE 50 MG TAB COLOSTOMY BAG WITH FLANGE AND CLAMP SIZE 50- 57 MM WITH DEODORANT CHARCOAL CHAMBER COLOSTOMY BAG WITH FLANGE AND CLAMP SIZE 60-	1 5 15 1	mg mg Bott GM mg unit	1 x od 1 x od 1 Drop twice a day Local apply once a day 1 x od 1 x thrice weekly	After Meal After Meal LA After Meal SOS	V V E E E V
514 515 516 517 518	1660 1662 1663 1667 1669	11723 11180 12122 11322	SACHET CLOMIPHENE CITRATE 100 MG TAB CLONIDINE 100 MCG TAB (ARKAMINE) CLOTRIMAZOLE 1% W/V IP+ LIGNOCAINE 2% W/V IP EAR DROP BOTT OF 10ML CLOTRIMAZOLE CREAM 1% TUBE OF 15 GM CLOZAPINE 50 MG TAB COLOSTOMY BAG WITH FLANGE AND CLAMP SIZE 50- 57 MM WITH DEODORANT CHARCOAL CHAMBER COLOSTOMY BAG WITH FLANGE AND CLAMP SIZE 60- 67 MM WITH DEODORANT	1 5 15 1	mg mg Bott GM mg unit	1 x od 1 x od 1 Drop twice a day Local apply once a day 1 x od 1 x thrice weekly	After Meal After Meal LA After Meal SOS	V V E E E V
514 515 516 517 518	1660 1662 1663 1667 1669	11723 11180 12122 11322	SACHET CLOMIPHENE CITRATE 100 MG TAB CLONIDINE 100 MCG TAB (ARKAMINE) CLOTRIMAZOLE 1% W/V IP+ LIGNOCAINE 2% W/V IP EAR DROP BOTT OF 10ML CLOTRIMAZOLE CREAM 1% TUBE OF 15 GM CLOZAPINE 50 MG TAB COLOSTOMY BAG WITH FLANGE AND CLAMP SIZE 50- 57 MM WITH DEODORANT CHARCOAL CHAMBER COLOSTOMY BAG WITH FLANGE AND CLAMP SIZE 60- 67 MM WITH DEODORANT CHARCOAL CHAMBER	1 5 15 1 1	mg Bott GM mg unit	1 x od 1 x od 1 Drop twice a day Local apply once a day 1 x od 1 x thrice weekly	After Meal After Meal LA After Meal SOS	V V E E E V E
514 515 516 517 518	1660 1662 1663 1667 1669	11723 11180 12122 11322	SACHET CLOMIPHENE CITRATE 100 MG TAB CLONIDINE 100 MCG TAB (ARKAMINE) CLOTRIMAZOLE 1% W/V IP+ LIGNOCAINE 2% W/V IP EAR DROP BOTT OF 10ML CLOTRIMAZOLE CREAM 1% TUBE OF 15 GM CLOZAPINE 50 MG TAB COLOSTOMY BAG WITH FLANGE AND CLAMP SIZE 50- 57 MM WITH DEODORANT CHARCOAL CHAMBER COLOSTOMY BAG WITH FLANGE AND CLAMP SIZE 60- 67 MM WITH DEODORANT CHARCOAL CHAMBER COLOSTOMY BAG WITH CHARCOAL CHAMBER COLOSTOMY BAG WITH	1 5 15 1	mg mg Bott GM mg unit	1 x od 1 x od 1 Drop twice a day Local apply once a day 1 x od 1 x thrice weekly	After Meal After Meal LA After Meal SOS	V V E E E V
514 515 516 517 518	1660 1662 1663 1667 1669	11723 11180 12122 11322	SACHET CLOMIPHENE CITRATE 100 MG TAB CLONIDINE 100 MCG TAB (ARKAMINE) CLOTRIMAZOLE 1% W/V IP+ LIGNOCAINE 2% W/V IP EAR DROP BOTT OF 10ML CLOTRIMAZOLE CREAM 1% TUBE OF 15 GM CLOZAPINE 50 MG TAB COLOSTOMY BAG WITH FLANGE AND CLAMP SIZE 50- 57 MM WITH DEODORANT CHARCOAL CHAMBER COLOSTOMY BAG WITH FLANGE AND CLAMP SIZE 60- 67 MM WITH DEODORANT CHARCOAL CHAMBER COLOSTOMY BAG WITH FLANGE AND CLAMP SIZE 60- 67 MM WITH DEODORANT CHARCOAL CHAMBER COLOSTOMY BAG WITH FLANGE & CLIP SIZE 70-76MM	1 5 15 1 1	mg Bott GM mg unit	1 x od 1 x od 1 Drop twice a day Local apply once a day 1 x od 1 x thrice weekly	After Meal After Meal LA After Meal SOS	V V E E E V E
514 515 516 517 518	1660 1662 1663 1667 1669	11723 11180 12122 11322	SACHET CLOMIPHENE CITRATE 100 MG TAB CLONIDINE 100 MCG TAB (ARKAMINE) CLOTRIMAZOLE 1% W/V IP+ LIGNOCAINE 2% W/V IP EAR DROP BOTT OF 10ML CLOTRIMAZOLE CREAM 1% TUBE OF 15 GM CLOZAPINE 50 MG TAB COLOSTOMY BAG WITH FLANGE AND CLAMP SIZE 50- 57 MM WITH DEODORANT CHARCOAL CHAMBER COLOSTOMY BAG WITH FLANGE AND CLAMP SIZE 60- 67 MM WITH DEODORANT CHARCOAL CHAMBER COLOSTOMY BAG WITH FLANGE & CLIP SIZE 70-76MM WITH DEODEANT CHARCAOL	1 5 15 1 1	mg Bott GM mg unit	1 x od 1 x od 1 Drop twice a day Local apply once a day 1 x od 1 x thrice weekly	After Meal After Meal LA After Meal SOS	V V E E E V E
514 515 516 517 518 519	1660 1662 1663 1667 1669 1670	11723 11180 12122 11322	SACHET CLOMIPHENE CITRATE 100 MG TAB CLONIDINE 100 MCG TAB (ARKAMINE) CLOTRIMAZOLE 1% W/V IP+ LIGNOCAINE 2% W/V IP EAR DROP BOTT OF 10ML CLOTRIMAZOLE CREAM 1% TUBE OF 15 GM CLOZAPINE 50 MG TAB COLOSTOMY BAG WITH FLANGE AND CLAMP SIZE 50- 57 MM WITH DEODORANT CHARCOAL CHAMBER COLOSTOMY BAG WITH FLANGE AND CLAMP SIZE 60- 67 MM WITH DEODORANT CHARCOAL CHAMBER COLOSTOMY BAG WITH FLANGE AND CLAMP SIZE 60- 67 MM WITH DEODORANT CHARCOAL CHAMBER COLOSTOMY BAG WITH FLANGE & CLIP SIZE 70-76MM WITH DEODEANT CHARCAOL CHAMBER	1 5 15 1 1	mg Bott GM mg unit unit	1 x od 1 x od 1 Drop twice a day Local apply once a day 1 x od 1 x thrice weekly 1 x thrice weekly	After Meal After Meal LA After Meal SOS SOS	V V E E E V E E
514 515 516 517 518	1660 1662 1663 1667 1669	11723 11180 12122 11322	SACHET CLOMIPHENE CITRATE 100 MG TAB CLONIDINE 100 MCG TAB (ARKAMINE) CLOTRIMAZOLE 1% W/V IP+ LIGNOCAINE 2% W/V IP EAR DROP BOTT OF 10ML CLOTRIMAZOLE CREAM 1% TUBE OF 15 GM CLOZAPINE 50 MG TAB COLOSTOMY BAG WITH FLANGE AND CLAMP SIZE 50- 57 MM WITH DEODORANT CHARCOAL CHAMBER COLOSTOMY BAG WITH FLANGE AND CLAMP SIZE 60- 67 MM WITH DEODORANT CHARCOAL CHAMBER COLOSTOMY BAG WITH FLANGE & CLIP SIZE 70-76MM WITH DEODEANT CHARCAOL	1 5 15 1 1	mg Bott GM mg unit	1 x od 1 x od 1 Drop twice a day Local apply once a day 1 x od 1 x thrice weekly	After Meal After Meal LA After Meal SOS	V V E E E V E
514 515 516 517 518 519 520	1660 1662 1663 1667 1669 1670	11723 11180 12122 11322	SACHET CLOMIPHENE CITRATE 100 MG TAB CLONIDINE 100 MCG TAB (ARKAMINE) CLOTRIMAZOLE 1% W/V IP+ LIGNOCAINE 2% W/V IP EAR DROP BOTT OF 10ML CLOTRIMAZOLE CREAM 1% TUBE OF 15 GM CLOZAPINE 50 MG TAB COLOSTOMY BAG WITH FLANGE AND CLAMP SIZE 50- 57 MM WITH DEODORANT CHARCOAL CHAMBER COLOSTOMY BAG WITH FLANGE AND CLAMP SIZE 60- 67 MM WITH DEODORANT CHARCOAL CHAMBER COLOSTOMY BAG WITH FLANGE CLIP SIZE 70-76MM WITH DEODEANT CHARCAOL CHAMBER COTTON ABSORBENT 500 GM	1 5 15 1 1 1	mg Bott GM mg unit unit	1 x od 1 x od 1 x od 1 Drop twice a day Local apply once a day 1 x od 1 x thrice weekly 1 x thrice weekly	After Meal After Meal LA After Meal SOS SOS	V V E E E V
514 515 516 517 518 519	1660 1662 1663 1667 1669 1670	11723 11180 12122 11322	SACHET CLOMIPHENE CITRATE 100 MG TAB CLONIDINE 100 MCG TAB (ARKAMINE) CLOTRIMAZOLE 1% W/V IP+ LIGNOCAINE 2% W/V IP EAR DROP BOTT OF 10ML CLOTRIMAZOLE CREAM 1% TUBE OF 15 GM CLOZAPINE 50 MG TAB COLOSTOMY BAG WITH FLANGE AND CLAMP SIZE 50- 57 MM WITH DEODORANT CHARCOAL CHAMBER COLOSTOMY BAG WITH FLANGE AND CLAMP SIZE 60- 67 MM WITH DEODORANT CHARCOAL CHAMBER COLOSTOMY BAG WITH FLANGE AND CLAMP SIZE 60- 67 MM WITH DEODORANT CHARCOAL CHAMBER COLOSTOMY BAG WITH FLANGE & CLIP SIZE 70-76MM WITH DEODEANT CHARCAOL CHAMBER COTTON ABSORBENT 500 GM	1 5 15 1 1	mg Bott GM mg unit unit	1 x od 1 x od 1 Drop twice a day Local apply once a day 1 x od 1 x thrice weekly 1 x thrice weekly	After Meal After Meal LA After Meal SOS SOS	V V E E E V E E
514 515 516 517 518 519 520 521 522	1660 1662 1663 1667 1669 1670 1671	11723 11180 12122 11322	SACHET CLOMIPHENE CITRATE 100 MG TAB CLONIDINE 100 MCG TAB (ARKAMINE) CLOTRIMAZOLE 1% W/V IP+ LIGNOCAINE 2% W/V IP EAR DROP BOTT OF 10ML CLOTRIMAZOLE CREAM 1% TUBE OF 15 GM CLOZAPINE 50 MG TAB COLOSTOMY BAG WITH FLANGE AND CLAMP SIZE 50- 57 MM WITH DEODORANT CHARCOAL CHAMRER COLOSTOMY BAG WITH FLANGE AND CLAMP SIZE 60- 67 MM WITH DEODORANT CHARCOAL CHAMRER COLOSTOMY BAG WITH FLANGE AND CLAMP SIZE 60- 67 MM WITH DEODORANT CHARCOAL CHAMRER COLOSTOMY BAG WITH FLANGE & CLIP SIZE 70-76MM WITH DEODEANT CHARCAOL CHAMBER COTTON ABSORBENT 500 GM COTTON NON ABSORBENT 500 GM	1 5 15 1 1 1 1 50	mg mg Bott GM mg unit unit	1 x od 1 x od 1 x od 1 Drop twice a day Local apply once a day 1 x od 1 x thrice weekly 1 x thrice weekly sos sos	After Meal After Meal LA After Meal SOS SOS SOS SOS	V V E E E V E E
514 515 516 517 518 519 520 521 522 523	1660 1662 1663 1667 1669 1670 1671 1671 1673	11723 11180 12122 11322	SACHET CLOMIPHENE CITRATE 100 MG TAB CLONIDINE 100 MCG TAB (ARKAMINE) CLOTRIMAZOLE 1% W/V IP+ LIGNOCAINE 2% W/V IP EAR DROP BOTT OF 10ML CLOTRIMAZOLE CREAM 1% TUBE OF 15 GM CLOZAPINE 50 MG TAB COLOSTOMY BAG WITH FLANGE AND CLAMP SIZE 50- 57 MM WITH DEODORANT CHARCOAL CHAMBER COLOSTOMY BAG WITH FLANGE AND CLAMP SIZE 60- 67 MM WITH DEODORANT CHARCOAL CHAMBER COLOSTOMY BAG WITH FLANGE & CLIP SIZE 70-76MM WITH DEODEANT CHARCAOL CHAMBER COTTON ABSORBENT 500 GM COTTON NON ABSORBENT 500 GM COVER GLASS STRIPS	1 5 1 1 1 1 50 50 1 1	mg mg Bott GM mg unit unit No No unit	1 x od 1 x od 1 x od 1 Drop twice a day Local apply once a day 1 x od 1 x thrice weekly 1 x thrice weekly sos sos sos	After Meal After Meal LA After Meal SOS SOS SOS After Meal	V V E E E V E E E
514 515 516 517 518 519 520 521 522 523 524	1660 1662 1663 1667 1669 1670 1671 1673 1674 1675 1676	11723 11180 12122 11322	SACHET CLOMIPHENE CITRATE 100 MG TAB CLONIDINE 100 MCG TAB (ARKAMINE) CLOTRIMAZOLE 1% W/V IP+ LIGNOCAINE 2% W/V IP EAR DROP BOTT OF 10ML CLOTRIMAZOLE CREAM 1% TUBE OF 15 GM CLOZAPINE 50 MG TAB COLOSTOMY BAG WITH FLANGE AND CLAMP SIZE 50- 57 MM WITH DEODORANT CHARCOAL CHAMBER COLOSTOMY BAG WITH FLANGE AND CLAMP SIZE 60- 67 MM WITH DEODORANT CHARCOAL CHAMBER COLOSTOMY BAG WITH FLANGE & CLIP SIZE 70-76MM WITH DEODORANT CHARCOAL CHAMBER COLOSTOMY BAG WITH FLANGE & CLIP SIZE 70-76MM WITH DEODEANT CHARCAOL CHAMBER COTTON ABSORBENT 500 GM COTTON NON ABSORBENT 500 GM COVER GLASS STRIPS COVER SLIP	1 5 1 1 1 1 50 50 1 1 1	mg mg Bott GM mg unit unit No No unit unit	1 x od 1 x od 1 x od 1 Drop twice a day Local apply once a day 1 x od 1 x thrice weekly 1 x thrice weekly sos sos sos sos	After Meal After Meal LA After Meal SOS SOS SOS After Meal After Meal After Meal	V V E E E E E E
514 515 516 517 518 519 520 521 522 523 524 525	1660 1662 1663 1667 1669 1670 1671 1671 1673	11723 11180 12122 11322 13926	SACHET CLOMIPHENE CITRATE 100 MG TAB CLONIDINE 100 MCG TAB (ARKAMINE) CLOTRIMAZOLE 1% W/V IP+ LIGNOCAINE 2% W/V IP EAR DROP BOTT OF 10ML CLOTRIMAZOLE CREAM 1% TUBE OF 15 GM CLOZAPINE 50 MG TAB COLOSTOMY BAG WITH FLANGE AND CLAMP SIZE 50- 57 MM WITH DEODORANT CHARCOAL CHAMBER COLOSTOMY BAG WITH FLANGE AND CLAMP SIZE 60- 67 MM WITH DEODORANT CHARCOAL CHAMBER COLOSTOMY BAG WITH FLANGE AND CLAMP SIZE 60- 67 MM WITH DEODORANT CHARCOAL CHAMBER COLOSTOMY BAG WITH FLANGE & CLIP SIZE 70-76MM WITH DEODEANT CHARCAOL CHAMBER COTTON ABSORBENT 500 GM COTTON NON ABSORBENT 500 GM COVER GLASS STRIPS COVER SLIP CREATININE	1 5 1 1 1 50 50 1 1 1 1 1	mg mg Bott GM mg unit unit No No unit unit mg	1 x od 1 x od 1 x od 1 Drop twice a day Local apply once a day 1 x od 1 x thrice weekly 1 x thrice weekly sos sos sos sos	After Meal After Meal LA After Meal SOS SOS SOS After Meal After Meal After Meal After Meal After Meal	V V E E E E E E E E E
514 515 516 517 518 519 520 521 522 523 524 525 526	1660 1662 1663 1667 1669 1670 1671 1673 1674 1675 1676 1677	11723 11180 12122 11322 13926	SACHET CLOMIPHENE CITRATE 100 MG TAB CLONIDINE 100 MCG TAB (ARKAMINE) CLOTRIMAZOLE 1% W/V IP+ LIGNOCAINE 2% W/V IP EAR DROP BOTT OF 10ML CLOTRIMAZOLE CREAM 1% TUBE OF 15 GM CLOZAPINE 50 MG TAB COLOSTOMY BAG WITH FLANGE AND CLAMP SIZE 50- 57 MM WITH DEODORANT CHARCOAL CHAMPER COLOSTOMY BAG WITH FLANGE AND CLAMP SIZE 60- 67 MM WITH DEODORANT CHARCOAL CHAMBER COLOSTOMY BAG WITH FLANGE AND CLAMP SIZE 60- 67 MM WITH DEODORANT CHARCOAL CHAMBER COLOSTOMY BAG WITH FLANGE & CLIP SIZE 70-76MM WITH DEODEANT CHARCAOL CHAMBER COTTON ABSORBENT 500 GM COYER GLASS STRIPS COVER SLIP CREATININE DARUNAVIR 300 MG TAB	1 5 1 1 1 1 50 50 1 1 1 1 1 1	mg mg Bott GM mg unit unit No No unit unit mg mg	1 x od 1 x od 1 x od 1 Drop twice a day Local apply once a day 1 x od 1 x thrice weekly 1 x thrice weekly sos sos sos sos 1 x od	After Meal After Meal LA After Meal SOS SOS SOS After Meal After Meal After Meal After Meal After Meal After Meal	V V E E E E E E E E E E E E E E E E E E
514 515 516 517 518 519 520 521 522 523 524 525 526 527	1660 1662 1663 1667 1669 1670 1671 1673 1674 1675 1676 1677	11723 11180 12122 11322 13926	SACHET CLOMIPHENE CITRATE 100 MG TAB CLONIDINE 100 MCG TAB (ARKAMINE) CLOTRIMAZOLE 1% W/V IP+ LIGNOCAINE 2% W/V IP EAR DROP BOTT OF 10ML CLOTRIMAZOLE CREAM 1% TUBE OF 15 GM CLOZAPINE 50 MG TAB COLOSTOMY BAG WITH FLANGE AND CLAMP SIZE 50- 57 MM WITH DEODORANT CHARCOAL CHAMBER COLOSTOMY BAG WITH FLANGE AND CLAMP SIZE 60- 67 MM WITH DEODORANT CHARCOAL CHAMBER COLOSTOMY BAG WITH FLANGE & CLIP SIZE 70-76MM WITH DEODORANT CHARCOAL CHAMBER COTTON ABSORBENT 500 GM COTTON NON ABSORBENT 500 GM COVER GLASS STRIPS COVER SLIP CREATININE DARUNAVIR 300 MG TAB DASATINIB 50 MG TAB	1 5 1 1 1 1 50 50 1 1 1 1 1 1 1 1 1 1 1	mg mg Bott GM mg unit unit No No unit unit unit mg mg	1 x od 1 x od 1 x od 1 Drop twice a day Local apply once a day 1 x od 1 x thrice weekly 1 x thrice weekly sos sos sos 1 x od 1 x od 1 x od	After Meal After Meal LA After Meal SOS SOS SOS After Meal	V V E E E E E E E E E E E E E E E E E E
514 515 516 517 518 519 520 521 522 523 524 525 526 527 528	1660 1662 1663 1667 1669 1670 1671 1671 1673 1674 1675 1676 1677 1688 1689	11723 11180 12122 11322 13926 13926	SACHET CLOMIPHENE CITRATE 100 MG TAB CLONIDINE 100 MCG TAB (ARKAMINE) CLOTRIMAZOLE 1% W/V IP+ LIGNOCAINE 2% W/V IP EAR DROP BOTT OF 10ML CLOTRIMAZOLE CREAM 1% TUBE OF 15 GM CLOZAPINE 50 MG TAB COLOSTOMY BAG WITH FLANGE AND CLAMP SIZE 50- 57 MM WITH DEODORANT CHARCOAL CHAMBER COLOSTOMY BAG WITH FLANGE AND CLAMP SIZE 60- 67 MM WITH DEODORANT CHARCOAL CHAMBER COLOSTOMY BAG WITH FLANGE & CLIP SIZE 70-76MM WITH DEODORANT CHARCOAL CHAMBER COTTON ABSORBENT 500 GM COTTON ABSORBENT 500 GM COTTON ON ABSORBENT 500 GM COVER GLASS STRIPS COVER SLIP CREATININE DARUNAVIR 300 MG TAB DASATINIB 50 MG TAB DASATINIB 50 MG TAB	1 5 15 1 1 1 1 50 50 1 1 1 1 1	mg mg Bott GM mg unit unit No No unit unit mg mg mg	1 x od 1 x od 1 x od 1 Drop twice a day Local apply once a day 1 x od 1 x thrice weekly 1 x thrice weekly sos sos sos 1 x od	After Meal LA After Meal SOS SOS SOS SOS After Meal	V V E E E E E E E V V
514 515 516 517 518 519 520 521 522 523 524 525 526 527	1660 1662 1663 1667 1669 1670 1671 1673 1674 1675 1676 1677	11723 11180 12122 11322 13926	SACHET CLOMIPHENE CITRATE 100 MG TAB CLONIDINE 100 MCG TAB (ARKAMINE) CLOTRIMAZOLE 1% W/V IP+ LIGNOCAINE 2% W/V IP EAR DROP BOTT OF 10ML CLOTRIMAZOLE CREAM 1% TUBE OF 15 GM CLOZAPINE 50 MG TAB COLOSTOMY BAG WITH FLANGE AND CLAMP SIZE 50- 57 MM WITH DEODORANT CHARCOAL CHAMBER COLOSTOMY BAG WITH FLANGE AND CLAMP SIZE 60- 67 MM WITH DEODORANT CHARCOAL CHAMBER COLOSTOMY BAG WITH FLANGE AND CLAMP SIZE 60- 67 MM WITH DEODORANT CHARCOAL CHAMBER COLOSTOMY BAG WITH FLANGE & CLIP SIZE 70-76MM WITH DEODEANT CHARCAOL CHAMBER COTTON ABSORBENT 500 GM COTTON NON ABSORBENT 500 GM COVER GLASS STRIPS COVER SLIP CREATININE DARUNAVIR 300 MG TAB DABIGATRAN 110 MG TAB INJ DEGLUDEC INSULIN 100	1 5 1 1 1 1 50 50 1 1 1 1 1 1 1 1 1 1 1	mg mg Bott GM mg unit unit No No unit unit unit mg mg	1 x od 1 x od 1 x od 1 Drop twice a day Local apply once a day 1 x od 1 x thrice weekly 1 x thrice weekly sos sos sos 1 x od 1 x od 1 x od	After Meal After Meal LA After Meal SOS SOS SOS After Meal BEFORE	V V E E E E E E E E E E E E E E E E E E
514 515 516 517 518 519 520 521 522 523 524 525 526 527 528	1660 1662 1663 1667 1669 1670 1671 1671 1673 1674 1675 1676 1677 1688 1689	11723 11180 12122 11322 13926 13926	SACHET CLOMIPHENE CITRATE 100 MG TAB CLONIDINE 100 MCG TAB (ARKAMINE) CLOTRIMAZOLE 1% W/V IP+ LIGNOCAINE 2% W/V IP EAR DROP BOTT OF 10ML CLOTRIMAZOLE CREAM 1% TUBE OF 15 GM CLOZAPINE 50 MG TAB COLOSTOMY BAG WITH FLANGE AND CLAMP SIZE 50- 57 MM WITH DEODORANT CHARCOAL CHAMBER COLOSTOMY BAG WITH FLANGE AND CLAMP SIZE 60- 67 MM WITH DEODORANT CHARCOAL CHAMBER COLOSTOMY BAG WITH FLANGE & CLIP SIZE 70-76MM WITH DEODORANT CHARCOAL CHAMBER COTTON ABSORBENT 500 GM COTTON ABSORBENT 500 GM COTTON ON ABSORBENT 500 GM COVER GLASS STRIPS COVER SLIP CREATININE DARUNAVIR 300 MG TAB DASATINIB 50 MG TAB DASATINIB 50 MG TAB	1 5 15 1 1 1 1 50 50 1 1 1 1 1	mg mg Bott GM mg unit unit No No unit unit mg mg mg	1 x od 1 x od 1 x od 1 Drop twice a day Local apply once a day 1 x od 1 x thrice weekly 1 x thrice weekly sos sos sos 1 x od	After Meal LA After Meal SOS SOS SOS SOS After Meal	V V E E E E E E E V V

530	1693	012856A	DELIVERY SYSTEM FOR	1	No	1 x od	After Meal	٧
			SALMETEROL +					
			FLUTICASONE ROTACAPS					
			WITH PIN PUNCTURE					
531	1694		DENGUE SEROLOGY RAPID	1	l kit	1 x od	After breakfast	E
	400=		KIT		110		200	
532	1695	40004	DENGUE TEST	1	NO	sos	SOS	E
533	1698	12681	DESMOPRESSIN ACETATE	5	ml	Local apply once a	After Meal	V
			NASAL SPRAY 1 MCG/ML			day		
534	1700	12344	BOTT OF 5 ML DESVENLAFAXINE 50 MG TAB	1	mg	1 x od	After Meal	D
004	1700	12044	DEGVEREAL AXINE OF ING TAB	•	g	1 7 00	Alter Mear	
535	1701	10587	DIACEREIN 50 MG TAB	1	mg	1 x od	After Meal	D
536	1703	10544	DIAZEPAM 10 MG /2ML	100	ML	1 tsp x od	After Meal	D
537	1706	12920	DICLOFENAC GEL 1%	30	GM	Local apply once a	LA	٧
			(VOVERAN)			day		
538	1707	10205	DICLOFENAC SODIUM 100 MG	1	mg	1 x od	After Meal	٧
			SR TAB					
539	1709	10265	DICLOFENAC SPRAY BOTTLE	40	GM	Local apply once a	LA	V
			OF 40 GM			dav		
540	1713	10611	DIETHYLCARBAMAZINE 50 MG	1	mg	1 x od	After Meal	E
544	4744		TAB	4			Add and March	V
541	1714	44404	DILTIAZEM 30 MG TAB	1 1	mg		After Meal	
542 543	1715 1719	11104	DILTIAZEM 60 MG TAB DISPOSABLE DIAGNOSTIC	1	mg I kit		After Meal	E D
343	17 19		CARTRIDGE EG6+, BOX OF 25		I KIL			
			OAK I KIDGE EGGT, BUX OF 25					
544	1720		DISPOSABLE DIAGNOSTIC	1	l kit			D
0.1.1	., 20		CARTRIDGE EG7+, BOX OF 25	•				
			5					
545	1721		DISPOSABLE DIAGNOSTIC	1	l kit			D
			CARTRIDGE G3+, BOX OF 25					
546	1722		DISPOSABLE DUAL HEATED	1	l kit			D
			WIRE VENTILATOR					
			BREATHING RESPIRATORY					
			CIRCUIT WITH AUTOFILL					
			HUMIDIFICATION CHAMBER					
547	1723		DISPOSABLE GOWN	1	NO	sos	SOS	E
548	1724		DISPOSABLE INSULIN PEN	1	no	1 x od	After Meal	E
549	1725		NEEDLES 4MM	1		4 11 4 4	After Meet	Е
549	1/25		DISPOSABLE INSULIN PEN	1	no	1 x od	After Meal	
550	1726		NEEDLES 6MM DISTILLED WATER	100	ML	Local apply once a	LA	V
330	1720		DISTILLED WATER	100	IVIL	day	LA	•
551	1728		DIVALPROEX SODIUM CR 500	1	mg	1 x od	After Meal	V
•••	0		MG TAB	-	9		7.11.01 111.041	-
552	1729		DIVALPROEX SODIUM SR 1000	1	mg	1 x od	After Meal	Е
			MG TAB					
553	1737	12308	DOXEPIN 25 MG CAP	1	mg	1 x od	After Meal	D
554	1738	12317	DOXEPIN 75 MG CAP	1	mg	1 x od	After Meal	D
555	1740	11724	DOXYLAMINE SUCCINATE 10	1	mg	1 x od	After Meal	D
			MG USP+PYRIDOXINE					
			HYDROCHLORIDE 10 MG IP					
EEC	4744	04451.02	TAR DUTASTEDIDE OF MC TAR	_	nc =-	1 x od	After Meet	V
556	1744	0115L03	DUTASTERIDE 0.5 MG TAB	1	mg No		After Meal	
557 558	1745 1746	120031 120030	DVT STOCKING LARGE DVT STOCKING MEDIUM	1	No No	once in a month once in a month	SOS SOS	V
559	1746	120030	DVT STOCKING MEDIUM DVT STOCKING XL	1	No	once in a month	SOS	E
560	1752		ED HYDROXY PROPYL	5	ml	1 Drop twice a day	After Meal	E
500			METHYLCELLULOSE +	,	.,,,,	. Drop thrice a day	Altor Moul	_
			DEXTRAN + GLYCERIN +					
			POLYSORBATE 80 WITH					
			POLYQUAD PRESERVATIVE					
			(EYEMIST) (TEAR NATURALE					
			EORTE\					
561	1755		ECG ELECTRODES	1	unit	sos	SOS	V
562	1756	10573	SACCHAROMYCES	1	mg	1 x od	After Meal	V
			BOULARDII 250 MG					
ECO	4750		(ECONORM) CAP	1	Nia	once in a manti-	202	V
563 564	1758 1759	11026	ELASTOPLAST ELTROMBOPAG 25 MG TAB	1	No	once in a month 1 x od	SOS After Meal	E
565	1759	13287	EMTRICITABINE 200 MG +	1	mg	1 x od	After Meal	V
303	1700	13201	TENOFOVIR 300 MG TAB		mg	1 X 00	Aitel Medi	•
566	1761	11144	ENALAPRIL 2.5 MG TAB	1	mg	1 x od	After Meal	V
567	1763		ENTECAVIR 0.5 MG TAB	1	mg	1 x od	After Meal	V
568	1765		ENTERAL FEEDING BAGS	1	NO	sos	SOS	V
569	1776		ESOMEPRAZOLE 20 MG +	1	mg	1 x od	After Meal	V
			DOMPERIDONE 30 MG TAB					
570	1778	11805	ESTRIOL 1 MG VAGINAL	10	Tube	Local apply once a	LA	٧
			CREAM (EVALON)			day		
571	1780	11022	ETHAMSYLATE 250 MG TAB	1	mg	1 x od	After Meal	E

572	1790	12022	ED LATANOPROST + TIMOLOL	5	ml	1 Drop twice a day	LA	V
573	1792	12038	ED PILOCARPINE	5	ml	1 Drop twice a day	LA	٧
574	1794	12054	EYE DROP TOBRAMYCIN0.3 % 5 ML	5	ml	1 Drop twice a day	LA	Е
575	1797		EYE OINT HYPROMELLOSE	5	Tube	1 Drop twice a day	After Meal	Е
0.0			2% (HYDROXYPROPYL			. Drop inico a aay	7	_
			METHYLCELLULOSE 2%					
			OCULAR LUBE)					
576	1800	44400	FENOFIBRATE 145 MG TAB	11	mg	1 x od	After Meal	V
577 578	1802 1803	11106	FENOFIBRATE 200 MG TAB FENTANYL 50 MCG	1	MG Patch	1 x od once in a month	After Meal SOS	E D
0,0	1000		TRANSDERMAL PATCH	•	1 aton	once in a month	000	
579	1804	10742	FENTANYL 25 MCG	1	Patch	once in a month	SOS	D
			TRANSDERMAL PATCH					
580	1805	11148	FILTER PAPER FLECAINIDE 50 MG TAB	1	unit	once in a month	SOS	D V
581 582	1807 1808	12012	ED FLUCONAZOLE 0.3%	5	mg ml	1 X od 1 Drop twice a day	After Meal After Meal	E
583	1813	12013	ED FLURBIPROFEN SODIUM	5	ml	2 Drop twice a day	LA	Ē
			0.3% 5 ML					
584	1816		FOLEYS CATHETER ALL SIZE	1	unit	once in a month	SOS	V
585	1817		FOLEYS CATHETER 2 WAY	1	unit	once in a month	sos	E
586	1818		SIZE 14 FR FOLEYS CATHETER 2 WAY	1	unit	once in a month	SOS	Е
300	1010		SIZE 16 FR		unit	Once in a month	303	_
587	1819	11014	FOLIC ACID 5 MG TAB	1	mg	1 x od	After Meal	Е
588	1821	12491	INH FORMOTEROL 6	1	Puff	1 Puff x OD	After Meal	٧
			MCG+TIOTROPIUM 9MCG MDI					
589	1823	11332	(DUOVA) FRAMYCETIN SULPHATE	15	GM	Local apply once a	LA	Е
569	1023	11332	CREAM BP 1% CREAM 15/20	15	GIVI	day	LA	_
			GMS (SOFRAMYCIN)			uay		
590	1824	11183	FRUSEMIDE 20 MG +	1	mg	1 x od	After Meal	Е
			SPIRONOLACTONE 50 MG TAB					
504	4000	44505	EDUCENDE 40 NO (1 4000)			4	46. 14	.,
591	1825	11507	FRUSEMIDE 40 MG (LASIX)	1	mg	1 x od	After Meal	V
592	1826		TAB FRUSEMIDE 40MG +	1	mg	1 x od	After Meal	Е
002	1020		AMITRORIDE 5MG TAB		9	1 X 00	Autor mour	_
593	1827	11391	FUSIDIC ACID OINT/CREAM	15	GM	Local apply once a	LA	Е
				_		day		_
594	1831	12014	GATIFLOXACIN 0.3% EYE	5	ml	1 Drop twice a day	After Meal	Е
595	1834		DROP BOTT OF 5 ML (E/D) GAUZE SURGICAL 60 CM WIDE	1	unit	once in a month	SOS	Е
				-				_
596	1836		GLOVES OPERATION SIZE 7(1	unit	sos	SOS	Е
	4000		POWDERED)				200	
597	1837		GLOVES OPERATION SIZE 7.5 (NON POWDERD)	1	unit	sos	sos	Е
598	1838		GLOVES SIZE 6 (NON	1	unit	sos	SOS	Е
			POWDERED)					
599	1839		GLOVES SIZE 6 (POWDERED)	1	unit	sos	SOS	Е
600	1840		GLOVES SIZE 6.5 (POWDERED)	1	unit	sos	sos	E
601	1841		GLOVES SIZE 6.5(NON	1	unit	sos	SOS	Е
001	10-11		POWDERED)		unit	303	303	_
602	1842		GLOVES SIZE 7(NON	1	unit	sos	sos	٧
			POWDERED)					_
603 604	1843		GLOVES SIZE 7 (POWDERED)	1	unit	sos	\$0S	E
604	1844		GLOVES SIZE 7.5 (POWDERED)		unit	sos	sos	E
605	1845		GLOVES SIZE 7.5(NON	1	unit	sos	sos	Е
			POWDERED)					
606	1546		GLUCO STRIP ACCUCHECK	30	NO	once in a month	sos	V
607	1047		ACTIVE PACK OF 50	30	NO	ance in a month	909	V
607	1847		GLUCO STRIP ONE TOUCH ULTRA	30	NO	once in a month	sos	٧
608	1848		GLUCO STRIP SIMPLE SELECT	50	NO	once in a month	sos	٧
609	1849		GLUCOMETER ONE TOUCH	30	NO	once in a month	sos	٧
640	1050		ULTRA (MACHINE)	30	NO	once in a result	909	V
610	1850		GLUCOMETER ACCUCHECK ACTIVE	30	NU	once in a month	sos	V
611	1851		GLUCOMETER SIMPLE	50	NO	once in a month	sos	٧
			SELECT					
612	1853	12924	GLUCOSAMINE 500 MG TAB	11	mg	1 x od	After Meal	E
613	1854		GLUCOSAMINE SULPHATE	1	mg	1 x od	After Meal	E
			750MG + METYUL					
			SULPHONYLMETHAONE 200MG + OXYDENTS AND					
			MINERALS					
614		11663	GLYCOPYROLATE 2 MG TAB	1	mg	1 x od	After Meal	E

615	1860	11715	INJ GOSERELIN 10.8 MG	1	ma		After Meal	Е
616	1863	12326	HALOPERIDOL SYP 2MG/ ML	100	mg ml	1 tsp x od	After Meal After Meal	D
0.0	1000	12020	BOTT OF 30 ML		••••	1 top x ou	Altor mour	
617	1864	16709	HCG (HUMAN CHORIONIC GONADOTROPIN HORMONE	1	NO	1 x od	After Meal	V
618	1865	11017	2000IU HEAMATINIC TAB/CAP	1	ma	1 x od	After Meal	D
6.19	1005	11017	CONTAINING FERROUS	1	mg	1 x 0a	Arter Wear	U
			FUMARATE VIT B-12 FOLIC					
			ACID AND VIT C, STRENGTH:					
			300MG 1 5MG 75MG MIN					
619	1869		INJ HAEMACCEL (CALCIUM	1	unit	1 x od	After Meal	D
			CHLORIDE + POTASSIUM					
			CHLORIDE+SODIUM					
620	1870		CHLORIDE) URO BAG	1	NO	1 x weekly	After Meal	D
621	1880		IBUPROFEN 200 MG TAB	1	mg	1 x od	After Meal	٧
622	1882		IBUPROFEN SYRUP	50	ml	1 tsp x od	After Meal	D
000	4004	40004	100MG/5ML BOTT OF 50 ML	_			46. 44.	_
623	1884	10834	IMATINIB MESYLATE 100MG TAB	1	mg	1 x od	After Meal	E
624	1889	11184	INDAPAMIDE SR 1.5 MG TAB	1	mg	1 x od	After Meal	Е
005	4005	44774	(NATRILEX)	000	14	40	DEFORE	
625	1895	11774	INSULIN HIGHLY PURIFIED HUMAN NEUTRAL 40IU/ML,10	300	unit	10 unit x od	BEFORE B.FAST/BEFORE	V
			ML INJ REGULAR				DINNER	
626	1896	11780	INSULIN HIGHLY PURIFIED	300	unit	10 unit x od	BEFORE	٧
			ISOPHANE (HUMAN NPH)				B.FAST/BEFORE	
	400=	44000	40IU/ML, 10 ML INJ		NO		DINNER	.,
627	1897	11033	INJ PNEUMOCOCAL VACCINE	1	NO	once in a month	After Meal	V
628	1899	11764	INSULIN PREMIXED BIPHASIC	300	unit	10 unit x od	BEFORE	٧
			A 40 IU PER ML (30% HUMAN				B.FAST/BEFORE	
			NEUTRAL PLUS 70% HUMAN				DINNER	
			ISOPHANE INSULIN) 10 ML INJ					
629	1902		INSULIN PREMIXED BIPHASIC	400	unit	10 unit x od	BEFORE	V
023	1302		HUMAN (50% HUMAN	400	unit	To unit x ou	B.FAST/BEFORE	•
			NEUTRAL 50% HUMAN				DINNER	
			ISOPHANE INSULIN) 10 ML INJ					
			,					
630	1903	50380	INSULIN SYRINGE (DISPOSABLE)	1	unit	1 x od	After Meal	V
631	1904	12862	INH IPRATROPIUM BROMIDE	1	Puff	1 Puff x OD	After Meal	٧
			20MCG + LEVOSALBUTAMOL					
			50 MCG MDI					
630	4000	44070	(DUOLIN/COMBINIST)	4	acak - t	4 yr maalibi	A Stan Black	V
632	1906	11676	ISABGOL/ISPAGHULA HUSK 3.5 GM	1	sachet	1 x weekly	After Meal	V
633	1909	11108	ISOSORBIDE DINITRATE 10	1	mg	1 x od	After Meal	Е
			MG TAB		,			
634	1911	11341	ISOTRETINOIN 20 MG TAB	1	mg	1 x od	After Meal	E
635	1914	10666	ITRACONAZOLE 100MG TAB	1	mg	1 x od	After Meal	V
636	1915		IV CANNULA WITH PORT AND WINGS 16 G	1	NO	sos	After Meal	٧
637	1916		IV CANNULA WITH PORT AND	1	NO	sos	After Meal	٧
			WINGS18 G					
638	1917		IV CANNULA WITH PORT AND	1	NO	sos	After Meal	٧
630	4040	40000	WINGS 20 G	4	111114	A vs and	A Stone Billion - I	W
639	1918	12932	IVIG HUMAN IMMUNOGLOBULIN 5 GM/100	1	unit	1 x od	After Meal	V
			ML S GM/100					
640	1920	11914	TAB ESSENTIAL AMINO ACID	1	mg	1 x od	After Meal	D
0.11	4004	440.10	KETOOONATOLE LOTION OF			Land and		
641	1921	11340	KETOCONAZOLE LOTION 2%+ ZINC PYRITHIONE BOTTLE OF	75	ml	Local apply once a	LA	E
			60ML			day		
642	1924		KETOSTICK BOTT(100 STRIP)	1	bottle			Е
643	1925		KIT FOR ESTIMATION OF	1	l kit			Е
644	1926		BILIRUBIN. KIT FOR ESTIMATION OF	1	l kit			Е
044	1920		CHOLESTROL.		1 KIT			_
645	1927		KIT FOR ESTIMATION OF	1	pkt			Е
			GLUCOSE.					
646	1928		KIT FOR ESTIMATION OF HDL.	1	l kit			E
647	1929		KIT FOR ESTIMATION OF	1	l kit			Е
			TRIGLYCERIDE.					_
648	1930		KIT FOR ESTIMATION OF URIC	1	l kit			E
640	4024		ACID.	1	N/-	once in a manti-	After Med	V
649	1931		KNEE CAPS (SIZE-L)		No	once in a month	After Meal	V

			10177 0177 10	_				
650	1932		KNEE CAPS (SIZE-M)	1	No	once in a month	After Meal	V
651	1933		KNEE CAPS (SIZE-XL)	1	No	once in a month	After Meal	D
652	1934	44740	KNEE CAPS (SIZE-XLL) LEVENORGESTROL 0.25 MG +	1	No	once in a month 1 x od	After Meal After Meal	D
653	1940	11746	ETHINYLESTRADIOL 0.05MG	1	mg	1 X OU	After Meal	E
			(PACK OF 20 TAB)					
654	1941	13290	LAMIVUDINE 150 MG TAB	1	mg	1 x od	After Meal	Е
655	1942	13289	LAMIVUDINE 150 MG 1AB	1	mg	1 x od	After Meal	Ē
033	1342	13203	STAVUDINE 40MG +		ilig	1 x ou	Aitei Weai	_
			NEVERAPINE 200MG TAB					
656	1943	13298	LAMIVUDINE 150MG +	1	mg	1 x od	After Meal	V
000		.0200	ZIDOVUDINE 300MG +	-	9		7.11.01.11.04.1	
			NEVERAPINE 200MG TAB					
657	1945	10564	LAMOTRIGINE 50 MG TAB	1	mg	1 x od	Before Meal	٧
658	1946		LANCET DISPOSABLE WITH	1	NO	1 x od	Before Meal	Е
			STD					
659	1951		LEISHMAN STAIN SOLUTION	1	null			Е
			READY TO USE					
660	1956	11745	LEVONORGESTREL	1	null			V
			INSTRUMENT SYSTEM DEVICE					
			ING-IUS					
661	1959	10129	LIGNOCAINE JELLY WITH	15	gm	Local apply once a	LA	V
			PLASTIC NOZZLE			day		
662	1960	11777	LINAGLIPTIN 2. 5MG TAB +	1	mg	1 x od	BEFORE	٧
			METFORMIN 500MG TAB				B.FAST/BEFORE	
							DINNER	
663	1964	13299	LOPINAVIR 200 + RITONAVIR	1	mg	1 x od	After Meal	V
			50MG TAB					
664	1968	11366	LOTION TERBINAFINE 1% 20ML	20	ml	Local apply once a	After Meal	V
						day		
665	1969	12023	LOTEPREDENOL ETABONATE	5	ml	Local apply once a	After Meal	E
			0.5% BOTT OF 5 ML			day		
666	4074		LUMPED DELT LABOR		N/ -	anaa in	After Mary	
666	1971 1972		LUMBER BELT LARGE	1	No No	once in a month	After Meal	E D
667 668	1972		LUMBER BELT MEDIUM MALARIA AG. KIT RAPID	1	l kit	once in a month	After Meal	E
669	1973	12475	MDI LEVOSALBUTAMOL 50	10	Puff	1 Puff x OD	After Meal	E
009	1974	12475	MCG 200 MD	10	Full	I Full X OD	Aitei Weai	_
670	1976	10878	MEGESTEROL ACETATE 40MG	1	mg	1 x od	After Meal	Е
0,0	1370	10070	TAB		g	1 7 00	Aitoi Mcai	_
671	1978	10866	MESNA RESPIRATORY	10	unit			Е
0	1010	10000	SOLUTION		unic			_
672	1981		METFORMIN 1000MG TAB	1	MG	1 x bd	After Meal	V
673	1983		METHOTREXATE 10MG TAB	1	mg	1 x od	After Meal	V
674	1984	10864	METHOTREXATE 5MG TAB	1	mg	1 x od	After Meal	V
675	1985		METHYLPHENIDATE (RITALIN)	1	mg	1 x od	After Meal	V
			18 MG BOTT OF 30 TAB					
676	1987		METHYLCOBALAMIN 500MG	1	mg	1 x od	After Meal	Е
			TAB					
677	1989	11648	METOCLOPRAMIDE 10 MG TAB	1	mg	1 x od	After Meal	D
070	4004		MIODO TIDO 400 4000 III DICT				Aitei Weai	
678	1991			40				
679			MICRO TIPS 100-1000 UL PKT	10	unit			V
0/9	1002		OF 1000					
	1992		OF 1000 MICRO TIPS 50-200 UL PKT OF	10	unit unit			V
680			OF 1000 MICRO TIPS 50-200 UL PKT OF 1000	10	unit			E
680	1992 1993		OF 1000 MICRO TIPS 50-200 UL PKT OF 1000 MICRO TIPS 5-50 UL PKT OF					
	1993		OF 1000 MICRO TIPS 50-200 UL PKT OF 1000 MICRO TIPS 5-50 UL PKT OF 1000	10	unit			E
681	1993 1995		OF 1000 MICRO TIPS 50-200 UL PKT OF 1000 MICRO TIPS 5-50 UL PKT OF 1000 MICROPORE	10	unit unit NO	sos	 sos	E E
681 682	1993 1995 1996	12607	OF 1000 MICRO TIPS 50-200 UL PKT OF 1000 MICRO TIPS 5-50 UL PKT OF 1000 MICROPORE MICROSCOPE SLIDE	10 1 1 1	unit unit NO unit	sos	 SOS	E E E
681	1993 1995	12607	OF 1000 MICRO TIPS 50-200 UL PKT OF 1000 MICRO TIPS 5-50 UL PKT OF 1000 MICROPORE	10	unit unit NO		 sos	E E
681 682 683	1993 1995 1996 2002	12607	OF 1000 MICRO TIPS 50-200 UL PKT OF 1000 MICRO TIPS 5-50 UL PKT OF 1000 MICROPORE MICROSCOPE SLIDE	10 1 1 1	unit unit NO unit mg	sos	 SOS	E E E
681 682	1993 1995 1996	12607	OF 1000 MICRO TIPS 50-200 UL PKT OF 1000 MICRO TIPS 5-50 UL PKT OF 1000 MICROPORE MICROSCOPE SLIDE MIRABEGRON 25MG TAB/CAP	10 1 1 1 1 1	unit unit NO unit mg	sos	SOS	E E E
681 682 683	1993 1995 1996 2002 2014		OF 1000 MICRO TIPS 50-200 UL PKT OF 1000 MICRO TIPS 5-50 UL PKT OF 1000 MICROPORE MICROSCOPE SLIDE MIRABEGRON 25MG TAB/CAP MUCOUS EXTRACTOR	10 1 1 1 1 1	unit unit NO unit mg	sos 1 x od	SOS After Meal	E E E E
681 682 683	1993 1995 1996 2002 2014		OF 1000 MICRO TIPS 50-200 UL PKT OF 1000 MICRO TIPS 5-50 UL PKT OF 1000 MICROPORE MICROSCOPE SLIDE MIRABEGRON 25MG TAB/CAP MUCOUS EXTRACTOR MYCOPHENOLATE SODIUM	10 1 1 1 1 1	unit unit NO unit mg	sos 1 x od	SOS After Meal	E E E E
681 682 683 684 685	1993 1995 1996 2002 2014 2016	10596	OF 1000 MICRO TIPS 50-200 UL PKT OF 1000 MICRO TIPS 5-50 UL PKT OF 1000 MICROPORE MICROSCOPE SLIDE MIRABEGRON 25MG TAB/CAP MUCOUS EXTRACTOR MYCOPHENOLATE SODIUM 250MG TAB	10 1 1 1 1 1	unit unit NO unit mg I kit mg	sos 1 x od	SOS After Meal After Meal	E E E E E
681 682 683 684 685	1993 1995 1996 2002 2014 2016	10596	OF 1000 MICRO TIPS 50-200 UL PKT OF 1000 MICRO TIPS 5-50 UL PKT OF 1000 MICROPORE MICROSCOPE SLIDE MIRABEGRON 25MG TAB/CAP MUCOUS EXTRACTOR MYCOPHENOLATE SODIUM 250MG TAB MYCOPHENOLATE SODIUM	10 1 1 1 1 1	unit unit NO unit mg I kit mg	sos 1 x od	SOS After Meal After Meal	E E E E E
681 682 683 684 685	1993 1995 1996 2002 2014 2016	10596	OF 1000 MICRO TIPS 50-200 UL PKT OF 1000 MICRO TIPS 5-50 UL PKT OF 1000 MICROPORE MICROSCOPE SLIDE MIRABEGRON 25MG TAB/CAP MUCOUS EXTRACTOR MYCOPHENOLATE SODIUM 250MG TAB MYCOPHENOLATE SODIUM 360MG TAB	10 1 1 1 1 1	unit unit NO unit mg I kit mg mg	50S 1 x od 1 x od 1 x od	SOS After Meal After Meal After Meal	E E E E D
681 682 683 684 685 686	1993 1995 1996 2002 2014 2016 2017 2020 2023	10596 11971 10273	OF 1000 MICRO TIPS 50-200 UL PKT OF 1000 MICRO TIPS 5-50 UL PKT OF 1000 MICROPORE MICROSCOPE SLIDE MIRABEGRON 25MG TAB/CAP MUCOUS EXTRACTOR MYCOPHENOLATE SODIUM 250MG TAB MYCOPHENOLATE SODIUM 360MG TAB NAPROXEN 250 MG TAB	10 1 1 1 1 1 1 1	unit unit NO unit mg I kit mg mg mg	1 x od	SOS After Meal After Meal After Meal After Meal After Meal After Meal	E E E D D D
681 682 683 684 685 686	1993 1995 1996 2002 2014 2016 2017	10596 11971 10273	OF 1000 MICRO TIPS 50-200 UL PKT OF 1000 MICRO TIPS 5-50 UL PKT OF 1000 MICROPORE MICROSCOPE SLIDE MIRABEGRON 25MG TAB/CAP MUCOUS EXTRACTOR MYCOPHENOLATE SODIUM 250MG TAB MYCOPHENOLATE SODIUM 360MG TAB NAPROXEN 250 MG TAB NAPROXEN 250 MG TAB	10 1 1 1 1 1 1 1	unit unit NO unit mg I kit mg mg	sos 1 x od 1 x od 1 x od 1 x od	SOS After Meal After Meal After Meal	E E E D D D
681 682 683 684 685 686	1993 1995 1996 2002 2014 2016 2017 2020 2023	10596 11971 10273	OF 1000 MICRO TIPS 50-200 UL PKT OF 1000 MICRO TIPS 5-50 UL PKT OF 1000 MICROPORE MICROSCOPE SLIDE MIRABEGRON 25MG TAB/CAP MUCOUS EXTRACTOR MYCOPHENOLATE SODIUM 250MG TAB MYCOPHENOLATE SODIUM 360MG TAB NAPROXEN 250 MG TAB NATURAL MICRONISED PROGESTERONE 100 MG TAB	10 1 1 1 1 1 1 1	unit unit NO unit mg I kit mg mg mg	1 x od	SOS After Meal After Meal After Meal After Meal After Meal After Meal	E E E E D D V
681 682 683 684 685 686 687 688	1993 1995 1996 2002 2014 2016 2017 2020 2023 2028	10596 11971 10273	OF 1000 MICRO TIPS 50-200 UL PKT OF 1000 MICRO TIPS 5-50 UL PKT OF 1000 MICROPORE MICROSCOPE SLIDE MIRABEGRON 25MG TAB/CAP MUCOUS EXTRACTOR MYCOPHENOLATE SODIUM 250MG TAB MYCOPHENOLATE SODIUM 360MG TAB NAPROXEN 250 MG TAB NAPROXEN 250 MG TAB NATURAL MICRONISED PROGESTERONE 100 MG TAB NELATON CATHETER 14FR	10 1 1 1 1 1 1 1 1	unit unit NO unit mg I kit mg mg mg mg NO	sos 1 x od 0 x od	SOS After Meal	E E E D D D V
681 682 683 684 685 686 687 688 689	1993 1995 1996 2002 2014 2016 2017 2020 2023 2028 2031	10596 11971 10273	OF 1000 MICRO TIPS 50-200 UL PKT OF 1000 MICRO TIPS 5-50 UL PKT OF 1000 MICROPORE MICROSCOPE SLIDE MIRABEGRON 25MG TAB/CAP MUCOUS EXTRACTOR MYCOPHENOLATE SODIUM 250MG TAB MYCOPHENOLATE SODIUM 360MG TAB NATURAL MICRONISED PROGESTERONE 100 MG TAB NELATON CATHETE 14FR NEOMYCIN + POLYMIXIN + BACITRACIN NEOSPORIN OINT	10 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	unit unit NO unit mg I kit mg mg mg mg NO	sos 1 x od conce in a month Local apply once a day	SOS After Meal	E E E D D V V D V
681 682 683 684 685 686 687 688	1993 1995 1996 2002 2014 2016 2017 2020 2023 2028	10596 11971 10273	OF 1000 MICRO TIPS 50-200 UL PKT OF 1000 MICRO TIPS 5-50 UL PKT OF 1000 MICROPORE MICROSCOPE SLIDE MIRABEGRON 25MG TAB/CAP MUCOUS EXTRACTOR MYCOPHENOLATE SODIUM 250MG TAB MYCOPHENOLATE SODIUM 360MG TAB NAPROXEN 250 MG TAB NATURAL MICRONISED PROGESTERONE 100 MG TAB NEATON CATHETER 14FR NEOMYCIN + POLYMIXIN + BACITRACIN NEOSPORIN OINT	10 1 1 1 1 1 1 1 1	unit unit NO unit mg I kit mg mg mg mg NO	sos 1 x od once in a month Local apply once a day Local apply once a	SOS After Meal	E E E D D V D D D
681 682 683 684 685 686 687 688 689	1993 1995 1996 2002 2014 2016 2017 2020 2023 2028 2031	10596 11971 10273	OF 1000 MICRO TIPS 50-200 UL PKT OF 1000 MICRO TIPS 5-50 UL PKT OF 1000 MICROPORE MICROSCOPE SLIDE MIRABEGRON 25MG TAB/CAP MUCOUS EXTRACTOR MYCOPHENOLATE SODIUM 250MG TAB MYCOPHENOLATE SODIUM 360MG TAB NAPROXEN 250 MG TAB NAPROXEN 250 MG TAB NATURAL MICRONISED PROGESTERONE 100 MG TAB NELATON CATHETER 14FR NEOMYCIN + POLYMIXIN + BACITRACIN NEOSPORIN OINT	10 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	unit unit NO unit mg I kit mg mg mg mg MO GM	sos 1 x od conce in a month Local apply once a day	SOS After Meal	E E E D D V V D V
681 682 683 684 685 686 687 688 689 690	1993 1995 1996 2002 2014 2016 2017 2020 2023 2028 2031	10596 11971 10273	OF 1000 MICRO TIPS 50-200 UL PKT OF 1000 MICRO TIPS 5-50 UL PKT OF 1000 MICROPORE MICROSCOPE SLIDE MIRABEGRON 25MG TAB/CAP MUCOUS EXTRACTOR MYCOPHENOLATE SODIUM 250MG TAB MYCOPHENOLATE SODIUM 360MG TAB NAPROXEN 250 MG TAB NATURAL MICRONISED PROGESTERONE 100 MG TAB NELATON CATHETER 14FR NEOMYCIN + POLYMIXIN + BACITRACIN NEOSPORIN OINT NEOMYCIN + POLYMIXIN + BACITRACIN NEOSPORIN POWDER	10 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 7 5	unit unit NO unit mg I kit mg mg mg GM	sos 1 x od once in a month Local apply once a day Local apply once a	SOS After Meal	E E E D D V D V
681 682 683 684 685 686 687 688 690	1993 1995 1996 2002 2014 2016 2017 2020 2023 2028 2031	10596 11971 10273 11731	OF 1000 MICRO TIPS 50-200 UL PKT OF 1000 MICRO TIPS 5-50 UL PKT OF 1000 MICROPORE MICROSCOPE SLIDE MIRABEGRON 25MG TAB/CAP MUCOUS EXTRACTOR MYCOPHENOLATE SODIUM 250MG TAB MYCOPHENOLATE SODIUM 360MG TAB NAPROXEN 250 MG TAB NAPROXEN 250 MG TAB NATURAL MICRONISED PROGESTERONE 100 MG TAB NELATON CATHETER 14FR NEOMYCIN + POLYMIXIN + BACITRACIN NEOSPORIN OINT NEOMYCIN + POLYMIXIN + BACITRACIN NEOSPORIN POWDER NAPHAZOLIN 0.01% E/D	10 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	unit unit NO unit mg I kit mg mg mg GM gm	sos 1 x od once in a month Local apply once a day Local apply once a day	SOS After Meal	E E E D D V D V
681 682 683 684 685 686 687 688 690	1993 1995 1996 2002 2014 2016 2017 2020 2023 2028 2031 2032	10596 11971 10273 11731	OF 1000 MICRO TIPS 50-200 UL PKT OF 1000 MICRO TIPS 5-50 UL PKT OF 1000 MICROPORE MICROSCOPE SLIDE MIRABEGRON 25MG TAB/CAP MUCOUS EXTRACTOR MYCOPHENOLATE SODIUM 250MG TAB MYCOPHENOLATE SODIUM 360MG TAB NATURAL MICRONISED PROGESTERONE 100 MG TAB NELATON CATHETER 14FR NEOMYCIN + POLYMIXIN + BACITRACIN NEOSPORIN POWDER NAPHAZOLIN 0.01% E/D NEVIRAPINE 200 MG TAB	10 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	unit unit NO unit mg I kit mg mg MG MG GM	sos 1 x od once in a month Local apply once a day Local apply once a day 1 Drop twice a day 1 x od	SOS After Meal	E E E E D D V D V E E E
681 682 683 684 685 686 687 688 690	1993 1995 1996 2002 2014 2016 2017 2020 2023 2028 2031	10596 11971 10273 11731	OF 1000 MICRO TIPS 50-200 UL PKT OF 1000 MICRO TIPS 5-50 UL PKT OF 1000 MICROPORE MICROSCOPE SLIDE MIRABEGRON 25MG TAB/CAP MUCOUS EXTRACTOR MYCOPHENOLATE SODIUM 250MG TAB MYCOPHENOLATE SODIUM 360MG TAB NAPROXEN 250 MG TAB NAPROXEN 250 MG TAB NATURAL MICRONISED PROGESTERONE 100 MG TAB NELATON CATHETER 14FR NEOMYCIN + POLYMIXIN + BACITRACIN NEOSPORIN OINT NEOMYCIN + POLYMIXIN + BACITRACIN NEOSPORIN POWDER NAPHAZOLIN 0.01% E/D	10 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	unit unit NO unit mg I kit mg mg mg GM gm	sos 1 x od once in a month Local apply once a day Local apply once a day	SOS After Meal	E E E D D V D V

						ı		
695	2038	12382	NICOTINE TRANSDERMAL	1	mg	1 x od	After Meal	D
606	2042	11150	PATCH 7MG	1	ma	1 x od	After Meal	V
696	2042	11150	NIFEDIPINE RETARD 20 MG	1	mg	1 X OU	After Meal	٧
697	2045	13311	CAP/TAB NITROFURANTOIN 100 MG CAP	1	mg	1 x od	After Meal	V
037	2043	13311	MITTO OTCANTON 100 MIG CAP	•	mg	1 x 00	Aitei Weai	•
698	2050		NORMAL SALINE 500ML	500	ml	sos	After Meal	V
699	2056	12848	OFLOXACIN 400 MG TAB	1	mg	1 x od	After Meal	V
700	2059	11309	BETAMETHASONE 0.05% +	20	GM	Local apply once a	LA	٧
			SALICYLIC ACID 3% OINT			day		
701	2061		OINT CLOBETASOLE 0.05% +	20	GM	Local apply once a	LA	٧
			SALICYLIC ACID 3.5%			day		
			+PROPYLENE GLYCOL OINT					
			TUBE OF 20GM					
702	2068	11305	TACROLIMUS 0.3% OINT	20	GM	Local apply once a	LA	V
700	0074	40070	OND ANOTTOON 6 MG TAD	4		day	A44 14 1	V
703 704	2074 2075	10872 12238	ONDANSETRON 8 MG TAB ONDANSETRON SYP 2	1 100	mg ml	1 x od 1 tsp x od	After Meal After Meal	D
704	2073	12230	MG/5ML IN BOTT OF 30 ML	100		i top x ou	Aitei Weai	
705	2077		ORAL TEETHING SOL (ZYTEE	10	ml	Local apply once a	After Meal	D
			MOUTH LOTION) 10ML			day	7.1.0.1.1.00.1	
706	2083	11689	PANCREATIN MICROSPHERES	1	mg	1 x od	After Meal	D
			150MG CAP					
707	2084	11620	PANCREATINE	1	mg	1 x od	After Meal	D
			MINIMICROSPHERE WITH					
		4	LIPASE 25000 CAP					ļ
708	2085	10278	PARACETAMOL 500MG +	1	mg	1 x od	After Meal	V
			IBUPROFEN 400MG					
700	2000	10277	TAB(COMBIFLAM)	400	ml	1 ton v cd	After Man	D
709	2088	102//	PARACETAMOL SYP	100	ml	1 tsp x od	After Meal	D
710	2089	11398	125MG/5ML PARADICHLOROBENZENE 2%	5	ml	1 Drop twice a day	After Meal	D
, 10	2003	11000	W/V + BENZOCAINE 2.7% W/V	,	.,,,,	. Drop twice a day	Aiter Mear	
			+ CHORBUTOL 5% +					
			TURPENTINE OIL 15% W/V					
			EAR DROP(CLEAR WAX)					
711	2092	11043	PAZOPANIB 200MG TAB	1	mg	1 x od	After Meal	D
712	2100	11619	POLIDOCANOL 3% INJN	11	no	sos	After Meal	D
713	2101	11683	POLYETHELEN GLYCOL +	10	ml	1 Drop twice a day	After Meal	D
			PROPYLENE GLYCOL					
74.4	0404	40740	(SYSTANE) E/D	4		4	A 64 NA 1	
714	2104	10719	POMALIDOMIDE 2 MG TAB	1	mg	1 x od	After Meal	D
714 715	2104 2105	10719 13238	POMALIDOMIDE 2 MG TAB POSACONAZOLE 40 MG/ML	1 100	mg ml	1 x od 1 tsp x od	After Meal After Meal	D D
			POMALIDOMIDE 2 MG TAB POSACONAZOLE 40 MG/ML ORAL SUSP BOTT 105 ML			1 tsp x od		
715	2105		POMALIDOMIDE 2 MG TAB POSACONAZOLE 40 MG/ML ORAL SUSP BOTT 105 ML POVIDONE IODINE SOLUTION	100	ml	1 tsp x od Local apply once a	After Meal	D
715	2105		POMALIDOMIDE 2 MG TAB POSACONAZOLE 40 MG/ML ORAL SUSP BOTT 105 ML	100	ml	1 tsp x od	After Meal	D
715	2105		POMALIDOMIDE 2 MG TAB POSACONAZOLE 40 MG/ML ORAL SUSP BOTT 105 ML POVIDONE IODINE SOLUTION	100	ml	1 tsp x od Local apply once a	After Meal	D
715 716 717	2105 2106 2107	13238	POMALIDOMIDE 2 MG TAB POSACONAZOLE 40 MG/ML ORAL SUSP BOTT 105 ML POVIDONE IODINE SOLUTION 5% BOTTLE OF 100 ML POVIDONE IODINEIP 5% W/W TUBE OF 15 GM	100 100 15	ml	1 tsp x od Local apply once a day Local apply once a day	After Meal After Meal After Meal	D E E
715 716 717 718	2105 2106 2107 2111	13238	POMALIDOMIDE 2 MG TAB POSACONAZOLE 40 MG/ML ORAL SUSP BOTT 105 ML POVIDONE IODINE SOLUTION 5% BOTTLE OF 100 ML POVIDONE IODINEIP 5% W/W TUBE OF 15 GM PRASUGREL 5 MG TAB	100 100 15 1	ml ml GM	1 tsp x od Local apply once a day Local apply once a day 1 x od	After Meal After Meal After Meal After Meal	D E E
715 716 717 718 719	2105 2106 2107 2111 2112	13238 11131 11190	POMALIDOMIDE 2 MG TAB POSACONAZOLE 40 MG/ML ORAL SUSP BOTT 105 ML POVIDONE IODINE SOLUTION 5% BOTTLE OF 100 ML POVIDONE IODINEIP 5% W/W TUBE OF 15 GM PRASUGREL 5 MG TAB PRAZOSIN SR 5 MG TAB	100 100 15 1	ml ml GM mg mg	1 tsp x od Local apply once a day Local apply once a day 1 x od 1 x od	After Meal After Meal After Meal After Meal After Meal After Meal	E E V
715 716 717 718 719 720	2105 2106 2107 2111 2112 2113	13238	POMALIDOMIDE 2 MG TAB POSACONAZOLE 40 MG/ML ORAL SUSP BOTT 105 ML POVIDONE IODINE SOLUTION 5% BOTTLE OF 100 ML POVIDONE IODINEIP 5% W/W TUBE OF 15 GM PRASUGREL 5 MG TAB PRAZOSIN SR 5 MG TAB PRAZOSIN SR 2.5 MG TAB	100 100 15 1 1	ml ml GM mg mg mg	1 tsp x od Local apply once a day Local apply once a day 1 x od 1 x od 1 x od	After Meal	E E V V V
715 716 717 718 719 720 721	2105 2106 2107 2111 2112 2113 2116	13238 11131 11190	POMALIDOMIDE 2 MG TAB POSACONAZOLE 40 MG/ML ORAL SUSP BOTT 105 ML POVIDONE IODINE SOLUTION 5% BOTTLE OF 100 ML POVIDONE IODINEIP 5% W/W TUBE OF 15 GM PRASUGREL 5 MG TAB PRAZOSIN SR 5 MG TAB PRAZOSIN SR 2.5 MG TAB PREGNANCY KIT OF 50 TEST	100 100 15 1 1 1 1 50	ml ml GM mg mg mg NO	1 tsp x od Local apply once a day Local apply once a day 1 x od 1 x od 0 nce in a month	After Meal	E E V V V E E
715 716 717 718 719 720 721 722	2105 2106 2107 2111 2112 2113 2116 2117	13238 11131 11190 11189	POMALIDOMIDE 2 MG TAB POSACONAZOLE 40 MG/ML ORAL SUSP BOTT 105 ML POVIDONE IODINE SOLUTION 5% BOTTLE OF 100 ML POVIDONE IODINEIP 5% W/W TUBE OF 15 GM PRASUGREL 5 MG TAB PRAZOSIN SR 5 MG TAB PRAZOSIN SR 2.5 MG TAB PREGNANCY KIT OF 50 TEST PRE-PRO TAB (PROBIOTIC)	100 100 15 1 1 1 1 50 1	ml ml GM mg mg mg NO mg	1 tsp x od Local apply once a day Local apply once a day 1 x od 1 x od 1 x od once in a month 1 x od	After Meal	E E V V V E E E
715 716 717 718 719 720 721	2105 2106 2107 2111 2112 2113 2116	13238 11131 11190	POMALIDOMIDE 2 MG TAB POSACONAZOLE 40 MG/ML ORAL SUSP BOTT 105 ML POVIDONE IODINE SOLUTION 5% BOTTLE OF 100 ML POVIDONE IODINEIP 5% W/W TUBE OF 15 GM PRASUGREL 5 MG TAB PRAZOSIN SR 5 MG TAB PREGNANCY KIT OF 50 TEST PRE-PRO TAB (PROBIOTIC) PRIMAQUINE (7.5MG BASE)	100 100 15 1 1 1 1 50	ml ml GM mg mg mg NO	1 tsp x od Local apply once a day Local apply once a day 1 x od 1 x od 0 nce in a month	After Meal	E E V V V E E
715 716 717 718 719 720 721 722 723	2105 2106 2107 2111 2112 2113 2116 2117 2119	13238 11131 11190 11189	POMALIDOMIDE 2 MG TAB POSACONAZOLE 40 MG/ML ORAL SUSP BOTT 105 ML POVIDONE IODINE SOLUTION 5% BOTTLE OF 100 ML POVIDONE IODINEIP 5% W/W TUBE OF 15 GM PRASUGREL 5 MG TAB PRAZOSIN SR 5 MG TAB PRAZOSIN SR 2.5 MG TAB PREGNANCY KIT OF 50 TEST PRE-PRO TAB (PROBIOTIC) PRIMAQUINE (7.5MG BASE) TAB	100 100 15 1 1 1 50 1	ml ml ml mg mg mg NO mg mg mg	1 tsp x od Local apply once a day Local apply once a day 1 x od 1 x od 1 x od once in a month 1 x od 1 x od	After Meal	E E V V V E E V
715 716 717 718 719 720 721 722	2105 2106 2107 2111 2112 2113 2116 2117	13238 11131 11190 11189	POMALIDOMIDE 2 MG TAB POSACONAZOLE 40 MG/ML ORAL SUSP BOTT 105 ML POVIDONE IODINE SOLUTION 5% BOTTLE OF 100 ML POVIDONE IODINEIP 5% W/W TUBE OF 15 GM PRASUGREL 5 MG TAB PRAZOSIN SR 5 MG TAB PREGNANCY KIT OF 50 TEST PRE-PRO TAB (PROBIOTIC) PRIMAQUINE (7.5MG BASE)	100 100 15 1 1 1 1 50 1	ml ml GM mg mg mg NO mg	1 tsp x od Local apply once a day Local apply once a day 1 x od 1 x od 1 x od once in a month 1 x od	After Meal	E E V V V E E E
715 716 717 718 719 720 721 722 723	2105 2106 2107 2111 2112 2113 2116 2117 2119	13238 11131 11190 11189	POMALIDOMIDE 2 MG TAB POSACONAZOLE 40 MG/ML ORAL SUSP BOTT 105 ML POVIDONE IODINE SOLUTION 5% BOTTLE OF 100 ML POVIDONE IODINEIP 5% W/W TUBE OF 15 GM PRASUGREL 5 MG TAB PRAZOSIN SR 5 MG TAB PRAZOSIN SR 2.5 MG TAB PREGNANCY KIT OF 50 TEST PRE-PRO TAB (PROBIOTIC) PRIMAQUINE (7.5MG BASE) TAB PRINTING PAPER SYSMEX XP-	100 100 15 1 1 1 50 1	ml ml ml mg mg mg NO mg mg mg	1 tsp x od Local apply once a day Local apply once a day 1 x od 1 x od 1 x od once in a month 1 x od 1 x od	After Meal	E E V V V E E V
715 716 717 718 719 720 721 722 723	2105 2106 2107 2111 2112 2113 2116 2117 2119 2120	13238 11131 11190 11189 10683	POMALIDOMIDE 2 MG TAB POSACONAZOLE 40 MG/ML ORAL SUSP BOTT 105 ML POVIDONE IODINE SOLUTION 5% BOTTLE OF 100 ML POVIDONE IODINEIP 5% W/W TUBE OF 15 GM PRASUGREL 5 MG TAB PRAZOSIN SR 5 MG TAB PREGNANCY KIT OF 50 TEST PRE-PRO TAB (PROBIOTIC) PRIMAQUINE (7.5MG BASE) TAB PRINTING PAPER SYSMEX XP- 100	100 100 15 1 1 1 50 1 1	ml ml ml mg mg mg NO mg mg NO	1 tsp x od Local apply once a day Local apply once a day 1 x od 1 x od 1 x od once in a month 1 x od once in a month	After Meal	E E V V V E E E C
715 716 717 718 719 720 721 722 723 724 725	2105 2106 2107 2111 2112 2113 2116 2117 2119 2120	13238 11131 11190 11189 10683	POMALIDOMIDE 2 MG TAB POSACONAZOLE 40 MG/ML ORAL SUSP BOTT 105 ML POVIDONE IODINE SOLUTION 5% BOTTLE OF 100 ML POVIDONE IODINEIP 5% W/W TUBE OF 15 GM PRASUGREL 5 MG TAB PRAZOSIN SR 5 MG TAB PRAZOSIN SR 2.5 MG TAB PREGNANCY KIT OF 50 TEST PRE-PRO TAB (PROBIOTIC) PRIMAQUINE (7.5MG BASE) TAB PRINTING PAPER SYSMEX XP- 100 PROPARACAINE 0.5% E/D	100 100 15 1 1 1 50 1 1 1	ml ml ml ml mg mg mg NO mg mg MO MO MO MO MO MI	1 tsp x od Local apply once a day Local apply once a day 1 x od 1 x od 1 x od once in a month 1 x od once in a month 1 x od 1 x od	After Meal	E E V V E E E E
715 716 717 718 719 720 721 722 723 724 725 726	2105 2106 2107 2111 2112 2113 2116 2117 2119 2120 2123 2124 2131	13238 11131 11190 11189 10683 12074 16113 11832	POMALIDOMIDE 2 MG TAB POSACONAZOLE 40 MG/ML ORAL SUSP BOTT 105 ML POVIDONE IODINE SOLUTION 5% BOTTLE OF 100 ML POVIDONE IODINEIP 5% W/W TUBE OF 15 GM PRASUGREL 5 MG TAB PRAZOSIN SR 5 MG TAB PRAZOSIN SR 2.5 MG TAB PREGNANCY KIT OF 50 TEST PRE-PRO TAB (PROBIOTIC) PRIMAQUINE (7.5MG BASE) TAB PRINTING PAPER SYSMEX XP- 100 PROPARACAINE 0.5% E/D PROPRANOLOL 10 MG TAB (INDERAL) PYRIDOSTIGMINE 60 MG TAB	100 100 15 1 1 1 1 50 1 1 1 5 1	ml ml ml ml mg mg mg NO mg mg MO MO MO MO MO MI	1 tsp x od Local apply once a day Local apply once a day 1 x od 1 x od 1 x od once in a month 1 x od once in a month 1 x od	After Meal	E E V V V E E V E E C C C C C C C C C C
715 716 717 718 719 720 721 722 723 724 725 726 727 728	2105 2106 2107 2111 2112 2113 2116 2117 2119 2120 2123 2124 2131 2137	13238 11131 11190 11189 10683	POMALIDOMIDE 2 MG TAB POSACONAZOLE 40 MG/ML ORAL SUSP BOTT 105 ML POVIDONE IODINE SOLUTION 5% BOTTLE OF 100 ML POVIDONE IODINEIP 5% W/W TUBE OF 15 GM PRASUGREL 5 MG TAB PRAZOSIN SR 5 MG TAB PREGNANCY KIT OF 50 TEST PRE-PRO TAB (PROBIOTIC) PRIMAQUINE (7.5MG BASE) TAB PRINTING PAPER SYSMEX XP- 100 PROPARACAINE 0.5% E/D PROPRANOLOL 10 MG TAB (INDERAL) PYRIDOSTIGMINE 60 MG TAB QUETIAPINE 50 MG TAB	100 100 15 1 1 1 50 1 1 1 5 1 1 1	ml ml mg mg mg NO mg mg mg NO ml mg mg mg	1 tsp x od Local apply once a day Local apply once a day 1 x od 1 x od 1 x od once in a month 1 x od once in a month 1 x od 1 x od once in a month	After Meal	E E V V V E E E V E E E E V
715 716 717 718 719 720 721 722 723 724 725 726 727 728 729	2105 2106 2107 2111 2112 2113 2116 2117 2119 2120 2123 2124 2131 2137 2138	13238 11131 11190 11189 10683 12074 16113 11832 12373	POMALIDOMIDE 2 MG TAB POSACONAZOLE 40 MG/ML ORAL SUSP BOTT 105 ML POVIDONE IODINE SOLUTION 5% BOTTLE OF 100 ML POVIDONE IODINEIP 5% W/W TUBE OF 15 GM PRASUGREL 5 MG TAB PRAZOSIN SR 5 MG TAB PREGNANCY KIT OF 50 TEST PRE-PRO TAB (PROBIOTIC) PRIMAQUINE (7.5MG BASE) TAB PRINTING PAPER SYSMEX XP- 100 PROPARACAINE 0.5% E/D PROPRANOLOL 10 MG TAB (INDERAL) PYRIDOSTIGMINE 60 MG TAB QUETIAPINE 50 MG TAB	100 100 15 1 1 1 50 1 1 1 1 5 1 1 1	ml ml GM mg mg mg NO mg mg mg NO mg mg null	1 tsp x od Local apply once a day Local apply once a day 1 x od 1 x od 1 x od once in a month 1 x od once in a month 1 x od 1 x od 1 x od	After Meal	E E V V E E E V E E E E V
715 716 717 718 719 720 721 722 723 724 725 726 727 728	2105 2106 2107 2111 2112 2113 2116 2117 2119 2120 2123 2124 2131 2137	13238 11131 11190 11189 10683 12074 16113 11832	POMALIDOMIDE 2 MG TAB POSACONAZOLE 40 MG/ML ORAL SUSP BOTT 105 ML POVIDONE IODINE SOLUTION 5% BOTTLE OF 100 ML POVIDONE IODINEIP 5% W/W TUBE OF 15 GM PRASUGREL 5 MG TAB PRAZOSIN SR 5 MG TAB PRAZOSIN SR 2.5 MG TAB PREGNANCY KIT OF 50 TEST PRE-PRO TAB (PROBIOTIC) PRIMAQUINE (7.5MG BASE) TAB PRINTING PAPER SYSMEX XP- 100 PROPARACAINE 0.5% E/D PROPRANOLOL 10 MG TAB (INDERAL) PYRIDOSTIGMINE 60 MG TAB QUETIAPINE 50 MG TAB R.A FACTOR FORMOTEROL 12MCG +	100 100 15 1 1 1 50 1 1 1 5 1 1 1	ml ml mg mg mg NO mg mg mg NO ml mg mg mg	1 tsp x od Local apply once a day Local apply once a day 1 x od 1 x od 1 x od once in a month 1 x od once in a month 1 x od	After Meal	E E V V V E E E V E E E E V
715 716 717 718 719 720 721 722 723 724 725 726 727 728 729 730	2105 2106 2107 2111 2112 2113 2116 2117 2119 2120 2123 2124 2131 2137 2138 2141	13238 11131 11190 11189 10683 12074 16113 11832 12373 12478	POMALIDOMIDE 2 MG TAB POSACONAZOLE 40 MG/ML ORAL SUSP BOTT 105 ML POVIDONE IODINE SOLUTION 5% BOTTLE OF 100 ML POVIDONE IODINEIP 5% W/W TUBE OF 15 GM PRASUGREL 5 MG TAB PRAZOSIN SR 5 MG TAB PRAZOSIN SR 2.5 MG TAB PREGNANCY KIT OF 50 TEST PRE-PRO TAB (PROBIOTIC) PRIMAQUINE (7.5MG BASE) TAB PRINTING PAPER SYSMEX XP- 100 PROPARACAINE 0.5% E/D PROPRANOLOL 10 MG TAB (INDERAL) PYRIDOSTIGMINE 60 MG TAB QUETIAPINE 50 MG TAB R.A FACTOR FORMOTEROL 12MCG + TIOTROPIUM 18MCG DPI	100 100 15 1 1 1 50 1 1 1 5 1 1 1 1 1 1	ml ml ml mg mg mg NO mg mg mg NO mg mg mg null mg	1 tsp x od Local apply once a day Local apply once a day 1 x od 1 x od 1 x od once in a month 1 x od once in a month 1 x od	After Meal	E E V V V E E V E V V V V V V V V V V V
715 716 717 718 719 720 721 722 723 724 725 726 727 728 729	2105 2106 2107 2111 2112 2113 2116 2117 2119 2120 2123 2124 2131 2137 2138	13238 11131 11190 11189 10683 12074 16113 11832 12373	POMALIDOMIDE 2 MG TAB POSACONAZOLE 40 MG/ML ORAL SUSP BOTT 105 ML POVIDONE IODINE SOLUTION 5% BOTTLE OF 100 ML POVIDONE IODINEIP 5% W/W TUBE OF 15 GM PRASUGREL 5 MG TAB PRAZOSIN SR 5 MG TAB PRAZOSIN SR 2.5 MG TAB PREGNANCY KIT OF 50 TEST PRE-PRO TAB (PROBIOTIC) PRIMAQUINE (7.5MG BASE) TAB PRINTING PAPER SYSMEX XP- 100 PROPARACAINE 0.5% E/D PROPRANOLOL 10 MG TAB (INDERAL) PYRIDOSTIGMINE 60 MG TAB QUETIAPINE 50 MG TAB R.A FACTOR FORMOTEROL 12MCG + TIOTROPIUM 18MCG DPI RANIBIZUMAB 2.3MG/0.23ML	100 100 15 1 1 1 50 1 1 1 1 5 1 1 1	ml ml GM mg mg mg NO mg mg mg NO mg mg null	1 tsp x od Local apply once a day Local apply once a day 1 x od 1 x od 1 x od once in a month 1 x od once in a month 1 x od 1 x od 1 x od	After Meal	E E V V E E E V E E E E V
715 716 717 718 719 720 721 722 723 724 725 726 727 728 729 730	2105 2106 2107 2111 2112 2113 2116 2117 2119 2120 2123 2124 2131 2137 2138 2141 2149	13238 11131 11190 11189 10683 12074 16113 11832 12373 12478	POMALIDOMIDE 2 MG TAB POSACONAZOLE 40 MG/ML ORAL SUSP BOTT 105 ML POVIDONE IODINE SOLUTION 5% BOTTLE OF 100 ML POVIDONE IODINEIP 5% W/W TUBE OF 15 GM PRASUGREL 5 MG TAB PRAZOSIN SR 5 MG TAB PRAZOSIN SR 2.5 MG TAB PREGNANCY KIT OF 50 TEST PRE-PRO TAB (PROBIOTIC) PRIMAQUINE (7.5MG BASE) TAB PRINTING PAPER SYSMEX XP- 100 PROPARACAINE 0.5% E/D PROPRANOLOL 10 MG TAB (INDERAL) PYRIDOSTIGMINE 60 MG TAB QUETIAPINE 50 MG TAB R.A FACTOR FORMOTEROL 12MCG + TIOTROPIUM 18MCG DPI RANIBIZUMAB 2.3MG/0.23ML INJECTION	100 100 15 1 1 1 50 1 1 1 5 1 1 1 1 1 1	ml ml ml mg mg mg mg NO mg mg mg nu nu mg	1 tsp x od Local apply once a day 1 x od 1 x od 1 x od 0 nce in a month 1 x od 0 nce in a month 1 x od 1 x od 0 nce in a month 1 x od 1 x od 0 nce in a month 1 x od 0 nce in a month	After Meal	E E V V E E E V E E V E E E E V E E E E
715 716 717 718 719 720 721 722 723 724 725 726 727 728 729 730	2105 2106 2107 2111 2112 2113 2116 2117 2119 2120 2123 2124 2131 2137 2138 2141	13238 11131 11190 11189 10683 12074 16113 11832 12373 12478	POMALIDOMIDE 2 MG TAB POSACONAZOLE 40 MG/ML ORAL SUSP BOTT 105 ML POVIDONE IODINE SOLUTION 5% BOTTLE OF 100 ML POVIDONE IODINEIP 5% W/W TUBE OF 15 GM PRASUGREL 5 MG TAB PRAZOSIN SR 5 MG TAB PRAZOSIN SR 2.5 MG TAB PREGNANCY KIT OF 50 TEST PRE-PRO TAB (PROBIOTIC) PRIMAQUINE (7.5MG BASE) TAB PRINTING PAPER SYSMEX XP- 100 PROPARACAINE 0.5% E/D PROPRANOLOL 10 MG TAB (INDERAL) PYRIDOSTIGMINE 60 MG TAB QUETIAPINE 50 MG TAB R.A FACTOR FORMOTEROL 12MCG + TIOTROPIUM 18MCG DPI RANIBIZUMAB 2.3MG/0.23ML INJECTION RECOMBINANT HUMAN	100 100 15 1 1 1 50 1 1 1 5 1 1 1 1 1 1	ml ml ml mg mg mg NO mg mg mg NO mg mg mg null mg	1 tsp x od Local apply once a day Local apply once a day 1 x od 1 x od 1 x od once in a month 1 x od once in a month 1 x od	After Meal	E E V V V E E V E V V V V V V V V V V V
715 716 717 718 719 720 721 722 723 724 725 726 727 728 729 730	2105 2106 2107 2111 2112 2113 2116 2117 2119 2120 2123 2124 2131 2137 2138 2141 2149	13238 11131 11190 11189 10683 12074 16113 11832 12373 12478	POMALIDOMIDE 2 MG TAB POSACONAZOLE 40 MG/ML ORAL SUSP BOTT 105 ML POVIDONE IODINE SOLUTION 5% BOTTLE OF 100 ML POVIDONE IODINEIP 5% W/W TUBE OF 15 GM PRASUGREL 5 MG TAB PRAZOSIN SR 5 MG TAB PRAZOSIN SR 2.5 MG TAB PREGNANCY KIT OF 50 TEST PRE-PRO TAB (PROBIOTIC) PRIMAQUINE (7.5MG BASE) TAB PRINTING PAPER SYSMEX XP- 100 PROPARACAINE 0.5% E/D PROPRANOLOL 10 MG TAB (INDERAL) PYRIDOSTIGMINE 60 MG TAB QUETIAPINE 50 MG TAB R.A FACTOR FORMOTEROL 12MCG + TIOTROPIUM 18MCG DPI RANIBIZUMAB 2.3MG/0.23ML INJECTION RECOMBINANT HUMAN GROWTH HORMONE 12 IU-24	100 100 15 1 1 1 50 1 1 1 5 1 1 1 1 1 1	ml ml ml mg mg mg mg NO mg mg mg nu nu mg	1 tsp x od Local apply once a day 1 x od 1 x od 1 x od 0 nce in a month 1 x od 0 nce in a month 1 x od 1 x od 0 nce in a month 1 x od 1 x od 0 nce in a month 1 x od 0 nce in a month	After Meal	E E V V E E E V E E V E E E E V E E E E
715 716 717 718 719 720 721 722 723 724 725 726 727 728 729 730	2105 2106 2107 2111 2112 2113 2116 2117 2119 2120 2123 2124 2131 2137 2138 2141 2149	13238 11131 11190 11189 10683 12074 16113 11832 12373 12478	POMALIDOMIDE 2 MG TAB POSACONAZOLE 40 MG/ML ORAL SUSP BOTT 105 ML POVIDONE IODINE SOLUTION 5% BOTTLE OF 100 ML POVIDONE IODINEIP 5% W/W TUBE OF 15 GM PRASUGREL 5 MG TAB PRAZOSIN SR 5 MG TAB PRAZOSIN SR 2.5 MG TAB PREGNANCY KIT OF 50 TEST PRE-PRO TAB (PROBIOTIC) PRIMAQUINE (7.5MG BASE) TAB PRINTING PAPER SYSMEX XP- 100 PROPARACAINE 0.5% E/D PROPRANOLOL 10 MG TAB (INDERAL) PYRIDOSTIGMINE 60 MG TAB QUETIAPINE 50 MG TAB QUETIAPINE 50 MG TAB R.A FACTOR FORMOTEROL 12MCG + TIOTROPIUM 18MCG DPI RANIBIZUMAB 2.3MG/0.23ML INJECTION RECOMBINANT HUMAN GROWTH HORMONE 12 IU-24 IU INJ (MULTIDOSE	100 100 15 1 1 1 50 1 1 1 5 1 1 1 1 1 1	ml ml ml mg mg mg mg NO mg mg mg nu nu mg	1 tsp x od Local apply once a day 1 x od 1 x od 1 x od 0 nce in a month 1 x od 0 nce in a month 1 x od 1 x od 0 nce in a month 1 x od 1 x od 0 nce in a month 1 x od 0 nce in a month	After Meal	E E V V E E E V E E V E E E E V E E E E
715 716 717 718 719 720 721 722 723 724 725 726 727 728 729 730	2105 2106 2107 2111 2112 2113 2116 2117 2119 2120 2123 2124 2131 2137 2138 2141 2149	13238 11131 11190 11189 10683 12074 16113 11832 12373 12478	POMALIDOMIDE 2 MG TAB POSACONAZOLE 40 MG/ML ORAL SUSP BOTT 105 ML POVIDONE IODINE SOLUTION 5% BOTTLE OF 100 ML POVIDONE IODINEIP 5% W/W TUBE OF 15 GM PRASUGREL 5 MG TAB PRAZOSIN SR 5 MG TAB PRAZOSIN SR 2.5 MG TAB PREGNANCY KIT OF 50 TEST PRE-PRO TAB (PROBIOTIC) PRIMAQUINE (7.5MG BASE) TAB PRINTING PAPER SYSMEX XP- 100 PROPARACAINE 0.5% E/D PROPRANOLOL 10 MG TAB (INDERAL) PYRIDOSTIGMINE 60 MG TAB QUETIAPINE 50 MG TAB R.A FACTOR FORMOTEROL 12MCG + TIOTROPIUM 18MCG DPI RANIBIZUMAB 2.3MG/0.23ML INJECTION RECOMBINANT HUMAN GROWTH HORMONE 12 IU-24	100 100 15 1 1 1 50 1 1 1 5 1 1 1 1 1 1	ml ml ml mg mg mg mg NO mg mg mg nu nu mg	1 tsp x od Local apply once a day 1 x od 1 x od 1 x od 0 nce in a month 1 x od 0 nce in a month 1 x od 1 x od 0 nce in a month 1 x od 1 x od 0 nce in a month 1 x od 0 nce in a month	After Meal	E E V V E E E V E E V E E E E V
715 716 717 718 719 720 721 722 723 724 725 726 727 728 729 730 731	2105 2106 2107 2111 2112 2113 2116 2117 2119 2120 2123 2124 2131 2137 2138 2141 2149 2153	13238 11131 11190 11189 10683 12074 16113 11832 12373 12478 12070	POMALIDOMIDE 2 MG TAB POSACONAZOLE 40 MG/ML ORAL SUSP BOTT 105 ML POVIDONE IODINE SOLUTION 5% BOTTLE OF 100 ML POVIDONE IODINEIP 5% W/W TUBE OF 15 GM PRASUGREL 5 MG TAB PRAZOSIN SR 5 MG TAB PRAZOSIN SR 5 MG TAB PREGNANCY KIT OF 50 TEST PRE-PRO TAB (PROBIOTIC) PRIMAQUINE (7.5MG BASE) TAB PRINTING PAPER SYSMEX XP- 100 PROPARACAINE 0.5% E/D PROPRANOLOL 10 MG TAB (INDERAL) PYRIDOSTIGMINE 60 MG TAB QUETIAPINE 50 MG TAB R.A FACTOR FORMOTEROL 12MCG + TIOTROPIUM 18MCG DPI RANIBIZUMAB 2.3MG/0.23ML INJECTION RECOMBINANT HUMAN GROWTH HORMONE 12 IU-24 IU INJ (MULTIDOSE CARTRIDGE)	100 100 15 1 1 1 1 50 1 1 1 1 1 1 1 1 1	ml ml ml mg mg mg ny NO mg mg mg null mg null mg unit	1 tsp x od Local apply once a day 1 x od 1 x od 1 x od once in a month 1 x od once in a month 1 x od 1 x od once in a month 1 x od 1 x od once in a month 1 x od once in a month 1 x od 1 x od 0 once in a month 1 unit x od 0 unit x od	After Meal	E E V V E E E V E E E E C E E E E E E E
715 716 717 718 719 720 721 722 723 724 725 726 727 728 729 730 731	2105 2106 2107 2111 2112 2113 2116 2117 2119 2120 2123 2124 2131 2137 2138 2141 2149 2153	13238 11131 11190 11189 10683 12074 16113 11832 12373 12478 12070	POMALIDOMIDE 2 MG TAB POSACONAZOLE 40 MG/ML ORAL SUSP BOTT 105 ML POVIDONE IODINE SOLUTION 5% BOTTLE OF 100 ML POVIDONE IODINEIP 5% W/W TUBE OF 15 GM PRASUGREL 5 MG TAB PRAZOSIN SR 5 MG TAB PRAZOSIN SR 5 MG TAB PREGNANCY KIT OF 50 TEST PRE-PRO TAB (PROBIOTIC) PRIMAQUINE (7.5MG BASE) TAB PRINTING PAPER SYSMEX XP- 100 PROPARACAINE 0.5% E/D PROPRANOLOL 10 MG TAB (INDERAL) PYRIDOSTIGMINE 60 MG TAB QUETIAPINE 50 MG TAB R.A FACTOR FORMOTEROL 12MCG + TIOTROPIUM 13MCG DPI RANIBIZUMAB 2.3MG/0.23ML INJECTION RECOMBINANT HUMAN GROWTH HORMONE 12 IU-24 IU INJ (MULTIDOSE CARTRIDGE) RECOMBINANT HUMAN	100 100 15 1 1 1 1 50 1 1 1 1 1 1 1 1 1	ml ml ml mg mg mg ny NO mg mg mg null mg null mg unit	1 tsp x od Local apply once a day 1 x od 1 x od 1 x od once in a month 1 x od once in a month 1 x od 1 x od once in a month 1 x od 1 x od once in a month 1 x od once in a month 1 x od 1 x od 0 once in a month 1 unit x od 0 unit x od	After Meal	E E V V V E E E V V E E V V E C V V C C C C
715 716 717 718 719 720 721 722 723 724 725 726 727 728 729 730 731	2105 2106 2107 2111 2112 2113 2116 2117 2119 2120 2123 2124 2131 2137 2138 2141 2149 2153	13238 11131 11190 11189 10683 12074 16113 11832 12373 12478 12070	POMALIDOMIDE 2 MG TAB POSACONAZOLE 40 MG/ML ORAL SUSP BOTT 105 ML POVIDONE IODINE SOLUTION 5% BOTTLE OF 100 ML POVIDONE IODINEIP 5% W/W TUBE OF 15 GM PRASUGREL 5 MG TAB PRAZOSIN SR 5 MG TAB PRAZOSIN SR 2.5 MG TAB PREGNANCY KIT OF 50 TEST PRE-PRO TAB (PROBIOTIC) PRIMAQUINE (7.5MG BASE) TAB PRINTING PAPER SYSMEX XP- 100 PROPARACAINE 0.5% E/D PROPRANOLOL 10 MG TAB (INDERAL) PYRIDOSTIGMINE 60 MG TAB R.A FACTOR FORMOTEROL 12MCG + TIOTROPIUM 18MCG DPI RANIBIZUMAB 2.3MG/0.23ML INJECTION RECOMBINANT HUMAN GROWTH HORMONE 12 IU-24 IU INJ (MULTIDOSE CARTRIDGE) RECOMBINANT HUMAN GROWTH HORMONE 15 IU	100 100 15 1 1 1 1 50 1 1 1 1 1 1 1 1 1	ml ml ml mg mg mg ny NO mg mg mg null mg null mg unit	1 tsp x od Local apply once a day 1 x od 1 x od 1 x od once in a month 1 x od once in a month 1 x od 1 x od once in a month 1 x od 1 x od once in a month 1 x od once in a month 1 x od 1 x od 0 once in a month 1 unit x od 0 unit x od	After Meal	E E V V E E E V E E E E C E E E E E E E
715 716 717 718 719 720 721 722 723 724 725 726 727 728 729 730 731	2105 2106 2107 2111 2112 2113 2116 2117 2119 2120 2123 2124 2131 2137 2138 2141 2149 2153	13238 11131 11190 11189 10683 12074 16113 11832 12373 12478 12070	POMALIDOMIDE 2 MG TAB POSACONAZOLE 40 MG/ML ORAL SUSP BOTT 105 ML POVIDONE IODINE SOLUTION 5% BOTTLE OF 100 ML POVIDONE IODINEIP 5% W/W TUBE OF 15 GM PRASUGREL 5 MG TAB PRAZOSIN SR 5 MG TAB PRAZOSIN SR 2.5 MG TAB PREGNANCY KIT OF 50 TEST PRE-PRO TAB (PROBIOTIC) PRIMAQUINE (7.5MG BASE) TAB PRINTING PAPER SYSMEX XP- 100 PROPARACAINE 0.5% E/D PROPRANOLOL 10 MG TAB (INDERAL) PYRIDOSTIGMINE 60 MG TAB QUETIAPINE 50 MG TAB QUETIAPINE 50 MG TAB R.A FACTOR FORMOTEROL 12MCG + TIOTROPIUM 18MCG DPI RANIBIZUMAB 2.3MG/0.23ML INJECTION RECOMBINANT HUMAN GROWTH HORMONE 12 IU-24 IU INJ (MULTIDOSE CARTRIDGE) RECOMBINANT HUMAN GROWTH HORMONE 15 IU (HGH)	100 100 15 1 1 1 1 50 1 1 1 1 1 1 1 1 1	ml ml ml mg mg mg NO mg mg NO mg mg ung NO unit	1 tsp x od Local apply once a day Local apply once a day 1 x od 1 x od 1 x od once in a month 1 x od once in a month 1 x od 1 x od once in a month 1 x od once in a month 1 Drop twice a day 1 x od once in a month	After Meal After Meal	E E V V V E E E V V E E V V E C V V C C C C
715 716 717 718 719 720 721 722 723 724 725 726 727 728 729 730 731 732	2105 2106 2107 2111 2112 2113 2116 2117 2119 2120 2123 2124 2131 2137 2138 2141 2149 2153	13238 11131 11190 11189 10683 12074 16113 11832 12373 12478 12070	POMALIDOMIDE 2 MG TAB POSACONAZOLE 40 MG/ML ORAL SUSP BOTT 105 ML POVIDONE IODINE SOLUTION 5% BOTTLE OF 100 ML POVIDONE IODINEIP 5% W/W TUBE OF 15 GM PRASUGREL 5 MG TAB PRAZOSIN SR 5 MG TAB PRAZOSIN SR 5 MG TAB PREGNANCY KIT OF 50 TEST PRE-PRO TAB (PROBIOTIC) PRIMAQUINE (7.5MG BASE) TAB PRINTING PAPER SYSMEX XP- 100 PROPARACAINE 0.5% E/D PROPRANOLOL 10 MG TAB (INDERAL) PYRIDOSTIGMINE 60 MG TAB R.A FACTOR FORMOTEROL 12MCG + TIOTROPIUM 18MCG DPI RANIBIZUMAB 2.3MG/0.23ML INJECTION RECOMBINANT HUMAN GROWTH HORMONE 12 IU-24 IU INJ (MULTIDOSE CARTRIDGE) RECOMBINANT HUMAN GROWTH HORMONE 15 IU (HGH) RECOMBINANT HUMAN GROWTH HORMONE 30 IU (HGH)	100 100 15 1 1 1 1 1 50 1 1 1 1 1 1 1 1	ml ml ml mg mg mg no mg mg no mg mg nu mg uni mg uni	1 tsp x od Local apply once a day Local apply once a day 1 x od 1 x od 1 x od once in a month 1 x od once in a month 1 x od 1 x od 1 x od once in a month 1 unit x od 10 unit x od	After Meal	E E V V E E E V V E E V V V V V V V V V
715 716 717 718 719 720 721 722 723 724 725 726 727 728 730 731 732	2105 2106 2107 2111 2112 2113 2116 2117 2119 2120 2123 2124 2131 2137 2138 2141 2149 2153 2154 2155	13238 11131 11190 11189 10683 12074 16113 11832 12373 12478 12070 11711 11712	POMALIDOMIDE 2 MG TAB POSACONAZOLE 40 MG/ML ORAL SUSP BOTT 105 ML POVIDONE IODINE SOLUTION 5% BOTTLE OF 100 ML POVIDONE IODINEIP 5% W/W TUBE OF 15 GM PRASUGREL 5 MG TAB PRAZOSIN SR 5 MG TAB PRAZOSIN SR 5 MG TAB PRAZOSIN SR 2.5 MG TAB PREGNANCY KIT OF 50 TEST PRE-PRO TAB (PROBIOTIC) PRIMAQUINE (7.5MG BASE) TAB PRINTING PAPER SYSMEX XP- 100 PROPARACAINE 0.5% E/D PROPRANOLOL 10 MG TAB (INDERAL) PYRIDOSTIGMINE 60 MG TAB QUETIAPINE 50 MG TAB R.A FACTOR FORMOTEROL 12MCG + TIOTROPIUM 18MCG DPI RANIBIZUMAB 2.3MG/0.23ML INJECTION RECOMBINANT HUMAN GROWTH HORMONE 12 IU-24 IU INJ (MULTIDOSE CARTRIDGE) RECOMBINANT HUMAN GROWTH HORMONE 15 IU (HGH) RECOMBINANT HUMAN GROWTH HORMONE 30 IU (HGH) REGORAFENIB 40 MG TAB	100 100 15 1 1 1 1 50 1 1 1 1 1 1 1 1 1	ml ml ml ml ml mg mg mg mg NO mg mg mg null mg mull mull mg unit unit unit	1 tsp x od Local apply once a day 1 x od 1 x od 1 x od 0 nce in a month 1 x od	After Meal After Meal	E E V V E E E V V E C V C C C C C C C C
715 716 717 718 719 720 721 722 723 724 725 726 727 733 731 732 734	2105 2106 2107 2111 2112 2113 2116 2117 2119 2120 2123 2124 2131 2137 2138 2141 2149 2153 2154 2155 2156 2166	13238 11131 11190 11189 10683 12074 16113 11832 12373 12478 12070 11711 11712	POMALIDOMIDE 2 MG TAB POSACONAZOLE 40 MG/ML ORAL SUSP BOTT 105 ML POVIDONE IODINE SOLUTION 5% BOTTLE OF 100 ML POVIDONE IODINEIP 5% W/W TUBE OF 15 GM PRASUGREL 5 MG TAB PRAZOSIN SR 5 MG TAB PREGNANCY KIT OF 50 TEST PRE-PRO TAB (PROBIOTIC) PRIMAQUINE (7.5MG BASE) TAB PRINTING PAPER SYSMEX XP- 100 PROPARACAINE 0.5% E/D PROPRANOLOL 10 MG TAB (INDERAL) PYRIDOSTIGMINE 60 MG TAB R.A FACTOR FORMOTEROL 12MCG + TIOTROPIUM 18MCG DPI RANIBIZUMAB 2.3MG/0.23ML INJECTION RECOMBINANT HUMAN GROWTH HORMONE 12 IU-24 IU INJ (MULTIDOSE CARTRIDGE) RECOMBINANT HUMAN GROWTH HORMONE 15 IU (HGH) RECOMBINANT HUMAN GROWTH HORMONE 30 IU (HGH) REGORAFENIB 40 MG TAB RIFAMPICIN 450MG CAP	100 100 15 1 1 1 1 1 5 1 1 1 1 1 1 1 1 1	ml ml ml ml mg mg mg ny ny ny ny mg mg mg null mg ml UNIT UNIT	1 tsp x od Local apply once a day Local apply once a day 1 x od 1 x od 1 x od once in a month 1 x od once in a month 1 Drop twice a day 1 x od	After Meal After Meal	E E V V V E E E V V V C C C C C C C C C
715 716 717 718 719 720 721 722 723 724 725 726 727 728 730 731 732	2105 2106 2107 2111 2112 2113 2116 2117 2119 2120 2123 2124 2131 2137 2138 2141 2149 2153 2154 2155	13238 11131 11190 11189 10683 12074 16113 11832 12373 12478 12070 11711 11712	POMALIDOMIDE 2 MG TAB POSACONAZOLE 40 MG/ML ORAL SUSP BOTT 105 ML POVIDONE IODINE SOLUTION 5% BOTTLE OF 100 ML POVIDONE IODINEIP 5% W/W TUBE OF 15 GM PRASUGREL 5 MG TAB PRAZOSIN SR 5 MG TAB PRAZOSIN SR 5 MG TAB PRAZOSIN SR 2.5 MG TAB PREGNANCY KIT OF 50 TEST PRE-PRO TAB (PROBIOTIC) PRIMAQUINE (7.5MG BASE) TAB PRINTING PAPER SYSMEX XP- 100 PROPARACAINE 0.5% E/D PROPRANOLOL 10 MG TAB (INDERAL) PYRIDOSTIGMINE 60 MG TAB QUETIAPINE 50 MG TAB R.A FACTOR FORMOTEROL 12MCG + TIOTROPIUM 18MCG DPI RANIBIZUMAB 2.3MG/0.23ML INJECTION RECOMBINANT HUMAN GROWTH HORMONE 12 IU-24 IU INJ (MULTIDOSE CARTRIDGE) RECOMBINANT HUMAN GROWTH HORMONE 15 IU (HGH) RECOMBINANT HUMAN GROWTH HORMONE 30 IU (HGH) REGORAFENIB 40 MG TAB	100 100 15 1 1 1 1 50 1 1 1 1 1 1 1 1 1	ml ml ml ml mg mg mg mg NO mg mg mg NO ml mg mg unil mg mull unit unit	1 tsp x od Local apply once a day 1 x od 1 x od 1 x od 0 nce in a month 1 x od	After Meal After Meal	E E V V E E E V V E C V C C C C C C C C

738 739 740								
	2169	11699	RIFAXIMINE 400MG TAB	1	mg	1 x od	After Meal	E
740	2173	12365	RIVASTIGMINE 1.5MG CAP	1	mg	1 tsp x od	After Meal	-
744	2174	12310	RIVASTIGMINE PATCH 10 CM	1	Patch	sos	After Meal	D
741	2175	42220	RIVASTIGMINE PATCH 5 CM	1	Patch	sos	After Meal SOS	D D
742	2176	12328	RIVASTIGMINE PATCH 5 CM		Patch	SOS	After Meal	D
743 744	2177 2178	10568	RIZATRIPTAN 5 MG TAB ROLLER BANDAGE 10 CM	1	mg	1 x od	After Meal	V
744	2178			1	unit	sos		D
745	2179	10906	ROLLER BANDAGE 6 CM ROPINIROLE 0.25 MG TAB	1	unit	sos 1 x od	After breakfast After Meal	V
747	2181	10907	ROPINIROLE 0.5 MG TAB	1	mg	1 x od	After Meal	E
747	2192	10907	SERRATIOPEPTIDASE 5MG	1	mg	1 x od	After Meal	Ē
740	2192			•	mg	i x ou	Aiter Wear	_
740	2196		TAB SGOPT	1	mII			Е
749 750	2196		SILICON CONDOM DRAINAGE	1	null		SOS	Ē
750	2199			•	no	sos	303	_
			MALE CATHETER 32MM					
751	2200		SILICON HEEL CUP	1				Е
751	2200		SILICON HEEL COP SILICON INSOLE	1	unit unit			Ē
753	2201	12610	SILODOSIN 4 MG TAB	1		1 x od	After Meel	Ē
		12610			mg		After Meal	
754	2203	40000	SIMVASTATIN 10MG TAB	1	mg	1 x od	After Meal	E V
755	2204	10603	SITAGLIPTIN 50MG TAB +	1	mg	1 x od	After Meal	V
			METFORMIN 500MG TAB	4	-,			
756	2205		SLID GLASS	1	unit	4 1	A C:	V
757	2215		SODIUM VALPROATE 300 MG	1	mg	1 x od	After Meal	V
		40===	TAB			200	200	
758		10558	INJ SODIUM VALPROATE	ı	MG	sos	sos	V
	0015		100MG/ML				A.C	
759	2216		SODIUM VALPROATE 300 MG	1	mg	1 x od	After Meal	E
			TAB(CR)		_			
760			SODIUM VALPROATE ORAL	100	ml	1 tsp x od	After Meal	٧
			SOL 200MG/5ML BOTT OF 100					
			ML					
761	2219		SOFOSBUVIR 400MG +	1	mg	1 x od	After Meal	E
			VELPATASVIR 100MG CAP					
762	2226		STERILE DISPOSABLE	1	unit	1 x stat	After Meal	E
			PLASTIC TOWEL/TROLLEY					
			COVER (SIZE 66CMX120CM)					
763	2227		STERILE GAUZE 10CM X 10CM	1	No	sos	After Meal	E
			X 8 PLY					
764	2228	12528	STERILE WATER FOR AMP OF	1	ml	1 x od	After Meal	E
			10ML					
765	2229		STERILLIUM 500 ML BOTTLE	500	ml	1 tsp x od	After Meal	E
766	2232	11639	SUCRALFATE 1GM/5ML BOTT	200	ml	1 tsp x od	After Meal	V
			OF 200 ML					
767	2233		SUCTION CATHETER 16FG	1	No	once in a month	After Meal	V
768	2234		SUCTION CATHETER 18FG	1	No	once in a month	After Meal	٧
769	2235	13261	SULPHAMETHOXAZOLE 400	1	mg	1 x od	After Meal	E
		13201						
		13201	MG + TRIMETHOPRIM 80MG					
		13201	MG + TRIMETHOPRIM 80MG TAB					
770	2238	10565		1	mg	1 x od	After Meal	V
770 771	2238 2239		TAB	<u>1</u> 1	mg mg	1 x od 1 x od	After Meal After Meal	V D
		10565	TAB SUMATRIPTAN 50 MG TAB					
771	2239	10565	TAB SUMATRIPTAN 50 MG TAB SUNITINIB 12.5MG TAB	1	mg	1 x od	After Meal	D
771 772	2239 2240	10565 10858	TAB SUMATRIPTAN 50 MG TAB SUNITINIB 12.5MG TAB SURGICAL MASK	1	mg No	1 x od sos	After Meal After Meal	D V
771 772	2239 2240	10565 10858	TAB SUMATRIPTAN 50 MG TAB SUNITINIB 12.5MG TAB SURGICAL MASK SYP CETRIZINE 5MG/5ML	1	mg No	1 x od sos	After Meal After Meal	D V
771 772 773	2239 2240 2242	10565 10858 12210	TAB SUMATRIPTAN 50 MG TAB SUNITINIB 12.5MG TAB SURGICAL MASK SYP CETRIZINE 5MG/5ML BOTT OF 60ML	1 1 60	mg No ml	1 x od sos 1 tsp x od	After Meal After Meal After Meal	D V D
771 772 773	2239 2240 2242	10565 10858 12210	TAB SUMATRIPTAN 50 MG TAB SUNITINIB 12.5MG TAB SURGICAL MASK SYP CETRIZINE 5MG/5ML BOTT OF 60ML SYP IRON WITH VITAMIN B 12 AND FOLIC ACID BOTTLE OF	1 1 60	mg No ml	1 x od sos 1 tsp x od	After Meal After Meal After Meal	D V D
771 772 773	2239 2240 2242	10565 10858 12210	TAB SUMATRIPTAN 50 MG TAB SUNITINIB 12.5MG TAB SURGICAL MASK SYP CETRIZINE 5MG/5ML BOTT OF 60ML SYP IRON WITH VITAMIN B 12	1 1 60	mg No ml	1 x od sos 1 tsp x od	After Meal After Meal After Meal	D V D
771 772 773 774	2239 2240 2242 2244	10565 10858 12210	TAB SUMATRIPTAN 50 MG TAB SUNITINIB 12.5MG TAB SURGICAL MASK SYP CETRIZINE 5MG/5ML BOTT OF 60ML SYP IRON WITH VITAMIN B 12 AND FOLIC ACID BOTTLE OF 200ML SYP SYRINGE DISPO PLASTIC	1 1 60 200	mg No ml	1 x od sos 1 tsp x od 1 tsp x od	After Meal After Meal After Meal After Meal	D V D
771 772 773 774	2239 2240 2242 2244	10565 10858 12210	TAB SUMATRIPTAN 50 MG TAB SUNITINIB 12.5MG TAB SURGICAL MASK SYP CETRIZINE 5MG/5ML BOTT OF 60ML SYP IRON WITH VITAMIN B 12 AND FOLIC ACID BOTTLE OF 200ML SYP	1 1 60 200	mg No ml	1 x od sos 1 tsp x od 1 tsp x od	After Meal After Meal After Meal After Meal	D V D
771 772 773 774	2239 2240 2242 2244 2244	10565 10858 12210	TAB SUMATRIPTAN 50 MG TAB SUNITINIB 12.5MG TAB SURGICAL MASK SYP CETRIZINE 5MG/5ML BOTT OF 60ML SYP IRON WITH VITAMIN B 12 AND FOLIC ACID BOTTLE OF 200ML SYP SYRINGE DISPO PLASTIC 10ML WITH NEEDLE SYRINGE DISPO PLASTIC 2ML	1 1 60 200	mg No ml ml	1 x od sos 1 tsp x od 1 tsp x od	After Meal After Meal After Meal After Meal After Meal	D V D E
771 772 773 774	2239 2240 2242 2244 2244	10565 10858 12210	TAB SUMATRIPTAN 50 MG TAB SUNITINIB 12.5MG TAB SURGICAL MASK SYP CETRIZINE 5MG/5ML BOTT OF 60ML SYP IRON WITH VITAMIN B 12 AND FOLIC ACID BOTTLE OF 200ML SYP SYRINGE DISPO PLASTIC 10ML WITH NEEDLE	1 1 60 200	mg No ml ml	1 x od sos 1 tsp x od 1 tsp x od	After Meal After Meal After Meal After Meal After Meal	D V D E
771 772 773 774 775 776	2239 2240 2242 2244 2244 2249 2250	10565 10858 12210	TAB SUMATRIPTAN 50 MG TAB SUNITINIB 12.5MG TAB SURGICAL MASK SYP CETRIZINE 5MG/5ML BOTT OF 60ML SYP IRON WITH VITAMIN B 12 AND FOLIC ACID BOTTLE OF 200ML SYP SYRINGE DISPO PLASTIC 10ML WITH NEEDLE SYRINGE DISPO PLASTIC 2ML WITH NEEDLE SYRINGE DISPO PLASTIC 5ML	1 1 60 200	mg No ml ml NO	1 x od	After Meal	D V D E V V
771 772 773 774 775 776	2239 2240 2242 2244 2244 2249 2250	10565 10858 12210	TAB SUMATRIPTAN 50 MG TAB SUNITINIB 12.5MG TAB SURGICAL MASK SYP CETRIZINE 5MG/5ML BOTT OF 60ML SYP IRON WITH VITAMIN B 12 AND FOLIC ACID BOTTLE OF 200ML SYP SYRINGE DISPO PLASTIC 10ML WITH NEEDLE SYRINGE DISPO PLASTIC 2ML WITH NEEDLE	1 1 60 200	mg No ml ml NO	1 x od	After Meal	D V D E V V
771 772 773 774 775 776 777 778	2239 2240 2242 2244 2244 2249 2250 2251 2257	10565 10858 12210 12242	TAB SUMATRIPTAN 50 MG TAB SUNITINIB 12.5MG TAB SURGICAL MASK SYP CETRIZINE 5MG/5ML BOTT OF 60ML SYP IRON WITH VITAMIN B 12 AND FOLIC ACID BOTTLE OF 200ML SYP SYRINGE DISPO PLASTIC 10ML WITH NEEDLE SYRINGE DISPO PLASTIC 2ML WITH NEEDLE SYRINGE DISPO PLASTIC 5ML WITH NEEDLE AXITINIB 5 MG TAB	1 1 60 200 1 1	mg No ml ml NO NO NO NO mg	1 x od	After Meal	D V D E
771 772 773 774 775 776 777 778 779	2239 2240 2242 2244 2249 2250 2251 2257 2258	10565 10858 12210 12242	TAB SUMATRIPTAN 50 MG TAB SUNITINIB 12.5MG TAB SUNITINIB 12.5MG TAB SURGICAL MASK SYP CETRIZINE 5MG/5ML BOTT OF 60ML SYP IRON WITH VITAMIN B 12 AND FOLIC ACID BOTTLE OF 200ML SYP SYRINGE DISPO PLASTIC 10ML WITH NEEDLE SYRINGE DISPO PLASTIC 2ML WITH NEEDLE SYRINGE DISPO PLASTIC 5ML WITH NEEDLE AXITINIB 5 MG TAB AZATHIOPRINE 100 MG TAB	1 1 60 200 1 1 1 1	mg No ml ml NO NO NO NO mg mg	1 x od	After Meal	V V V V
771 772 773 774 775 776 777 778	2239 2240 2242 2244 2249 2250 2251 2257 2258 2263	10565 10858 12210 12242 10703	TAB SUMATRIPTAN 50 MG TAB SUNITINIB 12.5MG TAB SURGICAL MASK SYP CETRIZINE 5MG/5ML BOTT OF 60ML SYP IRON WITH VITAMIN B 12 AND FOLIC ACID BOTTLE OF 200ML SYP SYRINGE DISPO PLASTIC 10ML WITH NEEDLE SYRINGE DISPO PLASTIC 2ML WITH NEEDLE AXITINIB 5 MG TAB AZATHIOPRINE 100 MG TAB BOSENTAN 62.5 MG TAB	1 1 60 200 1 1 1	mg No ml MO NO NO NO mg mg mg	1 x od sos 1 tsp x od 1 tsp x od 1 x	After Meal	D V D E
771 772 773 774 775 776 777 778 779 780	2239 2240 2242 2244 2249 2250 2251 2257 2258	10565 10858 12210 12242	TAB SUMATRIPTAN 50 MG TAB SUNITINIB 12.5MG TAB SURGICAL MASK SYP CETRIZINE 5MG/5ML BOTT OF 60ML SYP IRON WITH VITAMIN B 12 AND FOLIC ACID BOTTLE OF 200ML SYP SYRINGE DISPO PLASTIC 10ML WITH NEEDLE SYRINGE DISPO PLASTIC 2ML WITH NEEDLE SYRINGE DISPO PLASTIC 5ML WITH NEEDLE AXITINIB 5 MG TAB AZATHIOPRINE 100 MG TAB BOSENTAN 62.5 MG TAB CALCIUM ACETATE667 MG	1 1 60 200 1 1 1 1 1 1	mg No ml ml NO NO NO NO mg mg	1 x od	After Meal	D V D E E E E E
771 772 773 774 775 776 777 778 779 780	2239 2240 2242 2244 2249 2250 2251 2257 2258 2263	10565 10858 12210 12242 10703	TAB SUMATRIPTAN 50 MG TAB SUNITINIB 12.5MG TAB SURGICAL MASK SYP CETRIZINE 5MG/5ML BOTT OF 60ML SYP IRON WITH VITAMIN B 12 AND FOLIC ACID BOTTLE OF 200ML SYP SYRINGE DISPO PLASTIC 10ML WITH NEEDLE SYRINGE DISPO PLASTIC 2ML WITH NEEDLE AXITINIB 5 MG TAB AZATHIOPRINE 100 MG TAB BOSENTAN 62.5 MG TAB	1 1 60 200 1 1 1 1 1 1	Mg No MI MI NO NO NO mg mg mg mg mg	1 x od sos 1 tsp x od 1 tsp x od 1 x	After Meal	D V D E E E E E
771 772 773 774 775 776 777 778 779 780 781	2239 2240 2242 2244 2249 2250 2251 2257 2258 2263 2266	10565 10858 12210 12242 10703 11114 16702	TAB SUMATRIPTAN 50 MG TAB SUNITINIB 12.5MG TAB SURGICAL MASK SYP CETRIZINE 5MG/5ML BOTT OF 60ML SYP IRON WITH VITAMIN B 12 AND FOLIC ACID BOTTLE OF 200ML SYP SYRINGE DISPO PLASTIC 10ML WITH NEEDLE SYRINGE DISPO PLASTIC 2ML WITH NEEDLE SYRINGE DISPO PLASTIC 5ML WITH NEEDLE AXITINIB 5 MG TAB AZATHIOPRINE 100 MG TAB BOSENTAN 62.5 MG TAB CALCIUM ACETATE667 MG TAB CYCLOPHOSPHOMIDE 50 MG	1 1 60 200 1 1 1 1 1 1 1	mg No ml MO NO NO NO mg mg mg	1 x od sos 1 tsp x od 1 tsp x od 1 x od	After Meal	V V V V E E E E
771 772 773 774 775 776 777 778 779 780 781	2239 2240 2242 2244 2249 2250 2251 2257 2258 2263 2266 2273	10565 10858 12210 12242 10703 11114 16702 10812	TAB SUMATRIPTAN 50 MG TAB SUNITINIB 12.5MG TAB SURGICAL MASK SYP CETRIZINE 5MG/5ML BOTT OF 60ML SYP IRON WITH VITAMIN B 12 AND FOLIC ACID BOTTLE OF 200ML SYP SYRINGE DISPO PLASTIC 10ML WITH NEEDLE SYRINGE DISPO PLASTIC 2ML WITH NEEDLE AXITINIB 5 MG TAB AZATHIOPRINE 100 MG TAB BOSENTAN 62.5 MG TAB CALCIUM ACETATE667 MG TAB CYCLOPHOSPHOMIDE 50 MG TAB	1 1 60 200 1 1 1 1 1 1 1	MG NO NO NO MG	1 x od	After Meal	V V V V E E E E
771 772 773 774 775 776 777 778 779 780 781	2239 2240 2242 2244 2249 2250 2251 2257 2258 2263 2266	10565 10858 12210 12242 10703 11114 16702	TAB SUMATRIPTAN 50 MG TAB SUNITINIB 12.5MG TAB SURGICAL MASK SYP CETRIZINE 5MG/5ML BOTT OF 60ML SYP IRON WITH VITAMIN B 12 AND FOLIC ACID BOTTLE OF 200ML SYP SYRINGE DISPO PLASTIC 10ML WITH NEEDLE SYRINGE DISPO PLASTIC 2ML WITH NEEDLE AXITINIB 5 MG TAB AZATHIOPRINE 100 MG TAB BOSENTAN 62.5 MG TAB CALCIUM ACETATE667 MG TAB CYCLOPHOSPHOMIDE 50 MG TAB DARUNAVIR 450 + RITUNAVIR	1 1 60 200 1 1 1 1 1 1 1 1	Mg No MI MI NO NO NO mg mg mg mg mg	1 x od sos 1 tsp x od 1 tsp x od 1 x od	After Meal	D V V V E E E E E E
771 772 773 774 775 776 777 778 779 780 781 782	2239 2240 2242 2244 2249 2250 2251 2257 2258 2263 2266 2273	10565 10858 12210 12242 10703 11114 16702 10812 13313	TAB SUMATRIPTAN 50 MG TAB SUNITINIB 12.5MG TAB SURGICAL MASK SYP CETRIZINE 5MG/5ML BOTT OF 60ML SYP IRON WITH VITAMIN B 12 AND FOLIC ACID BOTTLE OF 200ML SYP SYRINGE DISPO PLASTIC 10ML WITH NEEDLE SYRINGE DISPO PLASTIC 2ML WITH NEEDLE AXITINIB 5 MG TAB AZATHIOPRINE 100 MG TAB BOSENTAN 62.5 MG TAB CALCIUM ACETATE667 MG TAB CYCLOPHOSPHOMIDE 50 MG TAB DARUNAVIR 450 + RITUNAVIR 50 MG TAB	1 1 60 200 1 1 1 1 1 1 1 1 1	mg No ml MO NO NO NO mg mg mg mg mg mg mg	1 x od	After Meal	D V V V E E E E E E
771 772 773 774 775 776 777 778 779 780 781	2239 2240 2242 2244 2249 2250 2251 2257 2258 2263 2266 2273	10565 10858 12210 12242 10703 11114 16702 10812	SUMATRIPTAN 50 MG TAB SUNITINIB 12.5MG TAB SURGICAL MASK SYP CETRIZINE 5MG/5ML BOTT OF 60ML SYP IRON WITH VITAMIN B 12 AND FOLIC ACID BOTTLE OF 200ML SYP SYRINGE DISPO PLASTIC 10ML WITH NEEDLE SYRINGE DISPO PLASTIC 2ML WITH NEEDLE SYRINGE DISPO PLASTIC 5ML WITH NEEDLE AXITINIB 5 MG TAB AZATHIOPRINE 100 MG TAB BOSENTAN 62.5 MG TAB CALCIUM ACETATE667 MG TAB CYCLOPHOSPHOMIDE 50 MG TAB DARUNAVIR 450 + RITUNAVIR 50 MG TAB DARUNAVIR 600 MG +	1 1 60 200 1 1 1 1 1 1 1 1	MG NO NO NO MG	1 x od	After Meal	V V V E E E D D
771 772 773 774 775 776 777 778 779 780 781 782 783	2239 2240 2242 2244 2249 2250 2251 2257 2258 2263 2266 2273 2277 2278	10565 10858 12210 12242 10703 11114 16702 10812 13313 13314	SUMATRIPTAN 50 MG TAB SUNITINIB 12.5MG TAB SURGICAL MASK SYP CETRIZINE 5MG/5ML BOTT OF 60ML SYP IRON WITH VITAMIN B 12 AND FOLIC ACID BOTTLE OF 200ML SYP SYRINGE DISPO PLASTIC 10ML WITH NEEDLE SYRINGE DISPO PLASTIC 2ML WITH NEEDLE SYRINGE DISPO PLASTIC 5ML WITH NEEDLE AXITINIB 5 MG TAB AZATHIOPRINE 100 MG TAB BOSENTAN 62.5 MG TAB CALCIUM ACETATE667 MG TAB CYCLOPHOSPHOMIDE 50 MG TAB DARUNAVIR 450 + RITUNAVIR 50 MG TAB DARUNAVIR 600 MG + RITUNAVIR 100 MG TABTAB	1 1 60 200 1 1 1 1 1 1 1 1	Mg No Ml NO NO NO Mg	1 x od	After Meal	V V V E E E D D
771 772 773 774 775 776 777 778 779 780 781 782 783 784	2239 2240 2242 2244 2244 2249 2250 2251 2257 2258 2263 2266 2273 2277 2278	10565 10858 12210 12242 10703 11114 16702 10812	SUMATRIPTAN 50 MG TAB SUNITINIB 12.5MG TAB SURGICAL MASK SYP CETRIZINE 5MG/5ML BOTT OF 60ML SYP IRON WITH VITAMIN B 12 AND FOLIC ACID BOTTLE OF 200ML SYP SYRINGE DISPO PLASTIC 10ML WITH NEEDLE SYRINGE DISPO PLASTIC 2ML WITH NEEDLE AXITINIB 5 MG TAB AZATHIOPRINE 100 MG TAB BOSENTAN 62.5 MG TAB CALCIUM ACETATE667 MG TAB CYCLOPHOSPHOMIDE 50 MG TAB DARUNAVIR 450 + RITUNAVIR 50 MG TAB DARUNAVIR 600 MG + RITUNAVIR 100 MG TABTAB DEFLAZACORT 6 MG TAB	1 1 60 200 1 1 1 1 1 1 1 1 1	mg No ml MO NO NO NO mg	1 x od	After Meal	V V V E E E D D D
771 772 773 774 775 776 777 778 779 780 781 782 783 784 785 786	2239 2240 2242 2244 2244 2249 2250 2251 2257 2258 2263 2266 2273 2277 2278 2282 2284	10565 10858 12210 12242 10703 11114 16702 10812 13313 13314 10256	SUMATRIPTAN 50 MG TAB SUNITINIB 12.5MG TAB SURGICAL MASK SYP CETRIZINE 5MG/5ML BOTT OF 60ML SYP IRON WITH VITAMIN B 12 AND FOLIC ACID BOTTLE OF 200ML SYP SYRINGE DISPO PLASTIC 10ML WITH NEEDLE SYRINGE DISPO PLASTIC 2ML WITH NEEDLE AXITINIB 5 MG TAB AZATHIOPRINE 100 MG TAB BOSENTAN 62.5 MG TAB CALCIUM ACETATE667 MG TAB CYCLOPHOSPHOMIDE 50 MG TAB DARUNAVIR 450 + RITUNAVIR 50 MG TAB DARUNAVIR 450 + RITUNAVIR 50 MG TAB DARUNAVIR 600 MG + RITUNAVIR 100 MG TABTAB DEFLAZACORT 6 MG TAB DEFLAZACORT 6 MG TAB DEFLAZACORT 6 MG TAB EPALRESTAT 150MG TAB	1 1 60 200 1 1 1 1 1 1 1 1 1 1 1	mg No ml MO NO NO NO mg	1 x od	After Meal	D V V V V V D E E E E D D D D D
771 772 773 774 775 776 777 778 779 780 781 782 783 784	2239 2240 2242 2244 2244 2249 2250 2251 2257 2258 2263 2266 2273 2277 2278	10565 10858 12210 12242 10703 11114 16702 10812 13313 13314	SUMATRIPTAN 50 MG TAB SUNITINIB 12.5MG TAB SURGICAL MASK SYP CETRIZINE 5MG/5ML BOTT OF 60ML SYP IRON WITH VITAMIN B 12 AND FOLIC ACID BOTTLE OF 200ML SYP SYRINGE DISPO PLASTIC 10ML WITH NEEDLE SYRINGE DISPO PLASTIC 2ML WITH NEEDLE AXITINIB 5 MG TAB AZATHIOPRINE 100 MG TAB BOSENTAN 62.5 MG TAB CALCIUM ACETATE667 MG TAB CYCLOPHOSPHOMIDE 50 MG TAB DARUNAVIR 450 + RITUNAVIR 50 MG TAB DARUNAVIR 450 + RITUNAVIR 50 MG TAB DARUNAVIR 600 MG + RITUNAVIR 100 MG TABTAB DEFLAZACORT 6 MG TAB EPALRESTAT 150MG TAB EPALRESTAT 150MG TAB ETHINYL ESTRADIOL 0.03MG	1 1 60 200 1 1 1 1 1 1 1 1 1	mg No ml MO NO NO NO mg	1 x od	After Meal	V V V E E E D D D
771 772 773 774 775 776 777 778 779 780 781 782 783 784 785 786	2239 2240 2242 2244 2244 2249 2250 2251 2257 2258 2263 2266 2273 2277 2278 2282 2284	10565 10858 12210 12242 10703 11114 16702 10812 13313 13314 10256	SUMATRIPTAN 50 MG TAB SUNITINIB 12.5MG TAB SURGICAL MASK SYP CETRIZINE 5MG/5ML BOTT OF 60ML SYP IRON WITH VITAMIN B 12 AND FOLIC ACID BOTTLE OF 200ML SYP SYRINGE DISPO PLASTIC 10ML WITH NEEDLE SYRINGE DISPO PLASTIC 2ML WITH NEEDLE SYRINGE DISPO PLASTIC 5ML WITH NEEDLE AXITINIB 5 MG TAB AZATHIOPRINE 100 MG TAB BOSENTAN 62.5 MG TAB CALCIUM ACETATE667 MG TAB CYCLOPHOSPHOMIDE 50 MG TAB DARUNAVIR 450 + RITUNAVIR 50 MG TAB DARUNAVIR 600 MG + RITUNAVIR 100 MG TABTAB DEFLAZACORT 6 MG TAB EPALRESTAT 150MG TAB ETHINYL ESTRADIOL 0.03MG + DROSPIRENONE 3 MG (KIT	1 1 60 200 1 1 1 1 1 1 1 1 1 1 1	mg No ml MO NO NO NO mg	1 x od	After Meal	D V V V V V E E E E D D D D
771 772 773 774 775 776 777 778 779 780 781 782 783 784 785 786 787	2239 2240 2242 2244 2249 2250 2251 2257 2258 2263 2266 2273 2277 2278 2282 2284 2292	10565 10858 12210 12242 10703 11114 16702 10812 13313 13314 10256	SUMATRIPTAN 50 MG TAB SUNITINIB 12.5MG TAB SURGICAL MASK SYP CETRIZINE 5MG/5ML BOTT OF 60ML SYP IRON WITH VITAMIN B 12 AND FOLIC ACID BOTTLE OF 200ML SYP SYRINGE DISPO PLASTIC 10ML WITH NEEDLE SYRINGE DISPO PLASTIC 2ML WITH NEEDLE AXITINIB 5 MG TAB AZATHIOPRINE 100 MG TAB BOSENTAN 62.5 MG TAB CALCIUM ACETATE667 MG TAB CYCLOPHOSPHOMIDE 50 MG TAB DARUNAVIR 450 + RITUNAVIR 50 MG TAB DARUNAVIR 450 + RITUNAVIR FITUNAVIR 100 MG TABTAB DEFLAZACORT 6 MG TAB EPALRESTAT 150MG TAB EPALRESTAT 150MG TAB ETHINYL ESTRADIOL 0.03MG + DROSPIRENONE 3 MG (KIT OF 21 TABI TAB	1 1 60 200 1 1 1 1 1 1 1 1 1 1 1 1	mg No ml MO NO NO NO mg	1 x od	After Meal	D V V V E E E E D D D D D D D D
771 772 773 774 775 776 777 778 779 780 781 782 783 784 785 786	2239 2240 2242 2244 2244 2249 2250 2251 2257 2258 2263 2266 2273 2277 2278 2282 2284	10565 10858 12210 12242 10703 11114 16702 10812 13313 13314 10256	SUMATRIPTAN 50 MG TAB SUNITINIB 12.5MG TAB SURGICAL MASK SYP CETRIZINE 5MG/5ML BOTT OF 60ML SYP IRON WITH VITAMIN B 12 AND FOLIC ACID BOTTLE OF 200ML SYP SYRINGE DISPO PLASTIC 10ML WITH NEEDLE SYRINGE DISPO PLASTIC 2ML WITH NEEDLE AXITINIB 5 MG TAB AZATHIOPRINE 100 MG TAB BOSENTAN 62.5 MG TAB CYCLOPHOSPHOMIDE 50 MG TAB DARUNAVIR 450 + RITUNAVIR 50 MG TAB DARUNAVIR 450 + RITUNAVIR 50 MG TAB DARUNAVIR 100 MG TABTAB DEFLAZACORT 6 MG TAB EPALRESTAT 150MG TAB EPALRESTAT 150MG TAB ETHINYL ESTRADIOL 0.03MG + DROSPIRENONE 3 MG (KIT OF 21 TAB) TAB HYDRALAZINE 37.5 +	1 1 60 200 1 1 1 1 1 1 1 1 1 1 1	mg No ml MO NO NO NO mg	1 x od	After Meal	D V V V V V E E E E D D D D
771 772 773 774 775 776 777 778 779 780 781 782 783 784 785 786 787	2239 2240 2242 2244 2249 2250 2251 2257 2258 2263 2266 2273 2277 2278 2282 2284 2292	10565 10858 12210 12242 10703 11114 16702 10812 13313 13314 10256	SUMATRIPTAN 50 MG TAB SUNITINIB 12.5MG TAB SURGICAL MASK SYP CETRIZINE 5MG/5ML BOTT OF 60ML SYP IRON WITH VITAMIN B 12 AND FOLIC ACID BOTTLE OF 200ML SYP SYRINGE DISPO PLASTIC 10ML WITH NEEDLE SYRINGE DISPO PLASTIC 2ML WITH NEEDLE AXITINIB 5 MG TAB AZATHIOPRINE 100 MG TAB BOSENTAN 62.5 MG TAB CALCIUM ACETATE667 MG TAB CYCLOPHOSPHOMIDE 50 MG TAB DARUNAVIR 450 + RITUNAVIR 50 MG TAB DARUNAVIR 450 + RITUNAVIR FITUNAVIR 100 MG TABTAB DEFLAZACORT 6 MG TAB EPALRESTAT 150MG TAB EPALRESTAT 150MG TAB ETHINYL ESTRADIOL 0.03MG + DROSPIRENONE 3 MG (KIT OF 21 TABI TAB	1 1 60 200 1 1 1 1 1 1 1 1 1 1 1 1	mg No ml MO NO NO NO mg	1 x od	After Meal	D V V V E E E E D D D D D D D D

			· · · · · · · · · · · · · · · · · · ·	_				_
789	2305	40574	LACOSAMIDE 100MG TAB	1	mg	1 x od	After Meal	D
790	2306	10571	LEDIPASVIR 90MG +	1	mg	1 x od	After Meal	D
791	2244	10306	SOFOSBUVIR 400MG TAB	1	ma	1 v od	After Meel	V
791	2311	10306	LEVOCETRIZINE 5MG +	1	mg	1 x od	After Meal	V
792	2312		MONTELUKAST 10MG TAB LEVODOPA 100MG +	1	mg	1 x od	After Meal	Е
732	2012		CARBIDOPA 25MG +	•	g	1 7 00	Alter Mear	_
			ENTACAPONE					
			200MG/SYNCAPONE TAR					
793	2313	11693	LOPERAMIDE 2MG TAB	1	mg	1 x od	After Meal	٧
794	2314	11671	MEBEVERINE 135 MG TAB	1	mg	1 x od	After Meal	Е
			(MEBASPA)					
795	2315		MEBEVERINE 200MG TAB	1	mg	1 x od	After Meal	D
			(MEBASPA)					
796	2325	12459	ACETYL CYSTEINE 600 MG	1	mg	1 x od	After Meal	D
			(MUCINAC) TAB					_
797	2327	10896	NILOTINIB 200MG TAB	11	mg	1 x od	After Meal	D
798 799	2329 2330	11052 11677	OSIMERTINIB 80 MG TAB	1	mg	1 x od 1 x od	After Meal Before Meal	E
799	2330	116//	PANTOPRAZOLE (40MG) +	1	mg	1 X OG	Before Meai	_
800	2336	16720	PREDNISOLONE 10MG TAB	1	mg	1 x od	After Meal	Е
801	2337	10720	PREDNISOLONE 5 MG TAB	1	mg	1 x od	After Meal	V
802	2345	10322	RUXOLITINIB 5MG TAB	1	mg	1 x od	After Meal	V
803	2348	10778	SAROGLITAZAR 4 MG TAB	1	mg	1 x od	After Meal	E
804	2353	10213	TIZANIDINE 2MG TAB	1	mg	1 x od	After Meal	E
805	2354	11957	VALGANCICLOVIR 450 GM TAB	1	mg	1 x od	After Meal	Ē
		,			9			_
806	2355	10578	ZONISAMIDE 50MG TAB	1	mg	1 x od	After Meal	Е
807	2360	10880	TAMOXIFEN CITRATE 20 MG	1	mg	1 x od	After Meal	V
			TAB					
808	2366		TELMISARTAN 20MG TAB	1	mg	1 x od	After Meal	V
809	2367	11197	TELMISARTAN H (40 MG + 12.5	1	mg	1 x od	After Meal	٧
			MG) TAB					
810	2369	18112	TENOFOVIR 300 +	1	mg	1 x od	After Meal	٧
			EMTRICITABINE 200MG +					
			EFAVIRENZE 600MG TAB					_
811	2370	13219	TENOFOVIR 300 +	1	mg	1 x od	After Meal	E
			LAMIVUDINE 300MG +					
040	0074		EFAVIRENZE 400MG TAB	4		4	Asten Merel	
812	2371		TENOFOVIR 300 +	1	mg	1 x od	After Meal	V
			LAMIVUDINE 300MG					
813	2375		+DOLUTEGRAVIR 50MG TEST MANTOUX (SUFFICENT	1	No		SOS	Е
013	23/5		FOR 10 TESTS)		NO	sos	303	_
814	2376		TEST TUBE 100X12MM	1	No	sos	sos	Е
815	2377	10527	TETRABENZEME 25MG TAB	1	mg	1 x od	After Meal	Ē
816	2378	10212	THIOCOLCHICOSIDE 4 MG	1	mg	1 x od	After Meal	E
0.0	20.0	.02.12	(MYORIL) TAB	•	9		7.11.01 111.04.1	_
817	2381		THYROXINE 50 MCG TAB	1	mg	1 x od	After Meal	٧
818	2383	11103	TICAGRELOR 90MG TAB	1	mg	1 x od	After Meal	٧
			(BRILINTA)					
819	2384		TIMOLOL MALEATE EYE	5	ml	1 Drop twice a day	After Meal	٧
			DROP 0.5% BOTT OF 5 ML					
820	2385	12374	TIANEPTINE 12.5 MG TAB	1	mg	1 x od	After Meal	V
821	2390	10609	TOLVAPTAN 15 MG TAB	1	mg	1 x od	After Meal	V
822	2391	11115	TORSEMIDE 10 MG TAB	1	mg	1 x od	After Meal	V
823	2394	10214	TRAMADOL 50 MG +	1	mg	1 x od	After Meal	V
004	2200		PARACETAMOL TAB	4		4 11 04	After Meri	
824	2396		TRANEXAMIC ACID 500 MG +	1	mg	1 x od	After Meal	V
825	2400	12366	MEFENAMIC 250 MG TAB TRAZODONE 50MG TAB	1	ma	1 x od	After Meal	D
826	2400	11364	TRIAMCINALONE 40MG	1	mg mg	1 x od	After Meal	D
020	2401	11304	(KENAKORT) INJ		ilig	1 x 0u	Aiter Wear	
827	2408	12055	TROPICAMIDE 0.5% WITH 5%	5	ml	1 Drop twice a day	After Meal	D
J-1	03	.2000	PHENYLEPHRINE EYE DROP			2.0p timos a day	tor in our	
			BOTT OF 5 ML (E/D)					
828	2409	12058	TROPICAMIDE EYE SOLUTION	5	ml	1 Drop twice a day	After Meal	٧
			1%, BOTT OF 5 ML					
829	2410	11634	TRYPSIN AND	1	mg	1 x od	After Meal	Е
			CHYMOTRYPSIN (6:1) 100000					
			AU ENTERIC COATED					
			(CHYMORAL FORT) TAR					
830	2412		TYPHI DOTKIT OF 50 TEST	50	no	once in a month	After Meal	E
831	2416		URINARY BAG	1	No	sos	SOS	V
832	2417		URINARY LEG BAG 540ML	1	No	sos	After Meal	E
833	2418		URINE CONTAINER	1	No	sos	After Meal	E
024	2440		DISPOSABLE	4	NO	200	After Meet	
834 835	2419 2420		URISTICK BOTT(100 STRIP) UROSTOMY BAG -60MM	1	NO No	sos 2 x weekly	After Meal After Meal	E
836	2420		UROSTOMY BAG -60MM UROSTOMY BAG WITH	1	No	2 x weekly	After Meal	E
030	Z7Z I		FLANGE SIZE 60-65MM		140	L A WEEKIY	Alter Meal	_
			I ETHIOL DIEL OU-DUINN					

837	2422		UROSTOMY BASE PLATE-	1	No	2 x weekly	After Meal	E
838	2423	11607	00MM URSODEOXYCHOLIC ACID 150	1	mg	1 x od	After Meal	V
839	2424		MG TAB (UDILIV) URSODEXYCHOLIC ACID	1	mg	1 x od	After Meal	V
			300MG TAB (UDILIV)					
840	2425		TUBE EDTA 2ML/3ML.	1	No	sos	After Meal	D
841	2426		VACCUM BLOOD COLLECTION TUBE SODIUM FLORIDE.	1	No	sos	After Meal	D
842	2427		VACCUM BLOOD COLLECTION	5	ml	1 Drop twice a day	After Meal	D
			TUBE WITHOUT GEL (STERILE) 5ML.					
			(3)					
843	2428		VACUTAINER NEEDLE	11	No	sos	After Meal	D
844	2432	12370	VENLAFAXINE 37.5MG TAB	11	mg	1 x od	After Meal	V
845	2435	11773	VILDAGLIPTIN 50MG TAB	1	mg	1 x od	BEFORE B.FAST/BEFORE DINNER	V
846	2437	12705	VITAMIN B COMPLEX WITH A	1	mg	1 x od	After Meal	D
			MINIMUM CONCENTRATION OF VIT B1-5 MG, VIT B6-3 MG VIT B12-5 MCG THERAPEUTIC TAB/CAP					
847	2441		WALKER ADULT	1	No	sos	After Meal	D
848	2442		WALKING STICK MONOPOD	1	No	sos	After Meal	D
849	2443		WALKING STICK TETRA POD	11	No	sos	After Meal	D
850	2445		WASA MOUSSE CLEANING AGENT	1	No	sos	After Meal	D
851	2446		WAX FOR WAX BATH (PHYSIOTHERAPY)	1	No	sos	After Meal	D
852	2448		WIDAL TEST	1	No	sos	After Meal	E
853	2451	12397	ZIPRASIDONE 40 MG TAB	1	mg	1 x od	After Meal	V
854	2453	40424	ZOLPIDEM 5 MG TAB	1	mg	1 x od	After Meal	V
855	2454 2455	10131	INJ ATROPINE 0.6 MG, 1 ML	1	No	sos	After Meal After Meal	V
856 857	2455	11655	5 AMINO SALICYLIC ACID SR	1	No MG	sos 1XOD	After Meal	D
057		11000	1.2 MG MESALAMINE		IVIG	IXOD	Alter Wedi	U
858	2459		5 AMINO SALICYLIC ACID 400 MG (MESALAMINE)	1	mg	1 x od	After Meal	D
859	2469		ADHESIVE PLASTER	1	No	once in a month	After Meal	V
860	2484	10656	CANDID MOUTH PAINT (CLOTRIMAZOLE)	1	NO	once in a month	After Meal	E
861	2487		THIOCOLCHICOSIDE 8 MG (MYORIL) TAB	1	MG	1 x od	After Meal	E
862	2492		PRAMIPEXOLE 0.5 MG TAB	1	MG	1 x od	After Meal	E
863	2502		ABDOMINAL BINDER ALL SIZES	1	NO	once in a month	After Meal	E
864	2503		MICROPORE 3	1	MG	1 x od	After Meal	E
865	2504	44500	GLUCOMETER STRIP	1	MG	1 x od	After Meal	E
866 867	2514	11526	TORSEMIDE 100 MG TAB PRASUGREL 10 MG TAB	1	MG MG	1 x od	After Meal After Meal	E V
868	2523 2524	11068	RASAGILINE 0.5 MG TAB	1	MG	1 x od 1 x od	After Meal	V
869	2532		ARM SLING POUCH	1	NO	once in a month	After Meal	V
870	2534		AUXILLARY CRUCHES ALL SIZE	1	NO	once in a month	After Meal	v
871	2535		BASE BALL FINGER SPLINT	1	NO	once in a month	After Meal	E
872		11310	CALAMINE LOTION 50 ML TUBE	60	ML	1 tsp x od	11310	E
873	2538	13211	CEFPODOXIME 200 MG TAB	1	MG	1 x od	After Meal	Е
874	2539		COMPRESSION STOCKINS ABOVE KNEE	1	NO	once in a month	After Meal	E
875	2542		ELASTIC KNEE SUPPORT LARGE	1	NO	once in a month	After Meal	E
876	2543		THYROXIN 100 MCG TAB	1	MG	1 x od	After Meal	E
877	2547	14757	EZETIMIBE 10 MG TAB	1	MG	1 x od	After Meal	E V
878	2549	11757	VILDAGLIPTIN 50 MG + METFORMIN 1000 MG TAB	1	MG	1 x od	BEFORE B.FAST/BEFORE DINNER	V
879	2554	11737	INJ DARBEPOETIN 200MG	1	NO	1 x weekly	after dinner	V
880	2557	10589	INJ DULAGLUTIDE 0.75 MG	1	NO	1 x weekly	After Meal	V
881	2564	11133	ROSUVASTATIN 5 MG TAB	1	MG	1 x od	After Meal	V
882	2566	11791	INJ TERIPARATIDE 750 MCG	300	unit	10 unit x od	After Meal	V
883	2567	10125	INJ DICLOFENAC 25MG/ML 3ML (VOVERAN)	1	NO	1 x od	After Meal	V
884	2571		LUMBO SACRAL BELT ALL SIZE	1	NO	once in a month	After Meal	E
885	2572		LUNAR SPLINT	1	NO	once in a month	After Meal	E

000	0570	40004	METUNI CODAL AMINI 4500 MO			4 1	A.S	_
886	2573	10931	METHYLCOBALAMIN 1500 MG TAB	1	MG	1 x od	After Meal	E
887	2586	12349	RISPERIDONE 4 MG TAB	1	MG	1 x od	After Meal	Е
888	2590	12858	SALMETEROL (50MCG) + FLUTICASONE PROPIONATE (250MCG) ROTACAP ISEROFLOW 2501	1	NO	1 x od	After Meal	E
889	2595		SHOULDER IMMOBILIZER ALL SIZE	1	NO	1 x stat	After Meal	E
890	2596	12611	SILODOSIN 8 MG CAP	1	MG	1 x od	After Meal	D
891	2599		TADALAFIL 20MG TAB	1	MG	1 x od	After Meal	D
892	2600		THUMB SPICA SPLINT ALL SIZE	1	NO	1 x stat	After Meal	Е
893	2601		TWO COST COLLAR	1	NO	1 x stat	After Meal	E
894	2603		WRIST AND FORARM BRACE NEOPRENE RTAND LT SIZE	1	NO	1 x stat	After Meal	E
895	2604		WRIST WARP TOWEL ALL SIZE	1	NO	1 x stat	After Meal	Е
896	2621		BETAHISTINE (VERTIN) 16 MG TAB	1	MG	1 x od	After Meal	V
897	2624	11742	PREDNISOLONE 20 MG TAB	1	MG	1 x od	After Meal	V
898	2627	10891	SUNITINIB 50MG TAB	1	mg	1 x od	After Meal	V
899	2628	11768	SITAGLIPTIN 100 MG TAB	1	mg	1 x od	After Meal	V
900	2629	11775	SITAGLIPTIN 50 MG TAB + METFORMIN 1000 MG TAB	1	mg	1 x od	After Meal	V
901	2630		SODIUM BICARBONATE 1000 MG TAB	1	MG	1 x od	After Meal	V
902	2632	1182	TELMISARTAN 40 MG TAB	1	MG	1 x od	After Meal	V
903	2640	13603	CANAGLIFLOZIN 300 MG TAB	1	MG	1 x od	After Meal	V
904	2641		COLOSTOMY BAG COMPLETE SET	1	MG	1 x od	After Meal	E
905	2643	4	COLOSTOMY PASTE	1	NO	once in a month	After Meal	E
906	2652	12818	ETHAMBUTOL 800 MG TAB	1	MG	1 x od	After Meal	E
907	2655	44000	GLUCOMETER	1	STAT	1 x stat	After Meal	E
908	2659 2662	11986 10641	INJ DARBEPOETIN 25 MG ISONIAZID 300MG TAB	1	NO MG	1 x weekly 1 x od	Before Meal After Meal	E V
910	2663	10041	LAMOTRIGINE 100MG TAB	1	MG	1 x od	After Meal	V
911	2665	11740	SAXAGLIPTIN 5 MG TAB	1	MG	1 x od	After Meal	V
912	2677	10513	LEVETIRACETAM 1000 MG TAB	1	NO	1 x od	After Meal	V
								-
913	2679	11653	ANTI HAEMORRHOIDAL CREAM WITH BECLOMETHASONE DIPROPIONATE (ANOVATE) OINT	20	GM	Local apply once a day	After Meal	D
914	2681	13924	PAROXETIN 25 MG TAB	1	MG	1 x od	After Meal	D
915	2682	10883	LENALIDOMIDE 10 MG TAB	1	MG	1 x od	After Meal	Е
916	2683	10711	ESTRAMUSTINE 140 MG TAB	1	MG	1 x od	After Meal	E
917	2684		PRIMIDONE 250 MG TAB	11	MG	1 x od	After Meal	Е
918	2686		TICAGRELOR 60 MG TAB (BRILINTA)	1	mg	1 x od	After Meal	D
919	2687	11159	METOPROLOL XL 25 MG TAB	1	mg	1 x od	After Meal	V
920	2695	12469	ETOPHYLLIN 115 MG + THIOPHYLLIN 35 MG) SR 150 MG TAB	1	MG	1 x od	After Meal	V
921	2700	11782	EMPAGLIFLOZIN 25 MG TAB	1	MG	1 x od	After Meal	V
922	2701	18108	ORNIDAZOLE 500MG TAB	1	MG	1 x od	After Meal	V
923	2702	12694	FINASTERIDE 5 MG TAB	11	MG	1 x od	After Meal	٧
924	2706	10725	MYCOPHENOLATE 500 MG TAB	1	MG	1 x od	After Meal	V
925	2708		PIRACETAM 800 MG TAB	11	MG	1 x od	After Meal	D
926	2714	16708	GLICLAZIDE 40 MG TAB	1	MG	1 x od	Before Meal	D
927	2715	10868	INJ BORTEZOMIB 2 MG	1	NO	1 x weekly	After Meal	D
928 929	2718 2721	11120 11506	SIMVASTATIN 20 MG TAB SACUBITRIL (49MG) +	1	MG MG	1 x od 1 x od	After Meal After Meal	D D
930	2722	11158	VALSARTAN (51MG) TAB SACUBITRIL (24MG) +	1	MG	1 x od	After Meal	D
931	2726	10534	VALSARTAN (26MG) TAB SYP LEVETIRACETAM	10	no	1 x od	After Meal	D
932	2733		INJ MIRCERA (EPOETIN ALFA)	1	NO	1 x od	After Meal	V
933	2735	11905	50 MCG INJ MIRCERA (EPOETIN ALFA)	1	NO	1 x od	After Meal	V
			100 MCG	4	140			
934 935	2739 2743	10296	PRUCALOPRIDE 1 MG TAB	1	MG MG	1 x od 1 x od	After Meal After Meal	٧
936	2751	10296	PARACETAMOL 650 MG TAB	1	MG	1 x od	After Meal	V
937		102012	(DOLO)	15	GM		LA	V
	2755	40.400	CLOBETASOL + NEOMYCIN (PROPYGENTA) CREAM			Local apply once a		
938	2758	12483	SYP COUGH EXPECTORANT 100 ML	100	ML	1 tsp x bd	After Meal	D
939		10851	INJ RITUXIMAB 100MG	1	NO	1 x weekly	After Meal	E

940	2767	12387	INJ PALIPERIDONE 75MG	1	NO	once in a month	After Meal	E
941	2769	20082	INJ HEPATITIS B 10ML	1	NO	once in a month	After Meal	E
942	2771	10518	RIZATRIPTAN 10 MG TAB	1	MG	1 x od	After Meal	E
943	2773	12372	ZOLPIDEM 10 MG TAB	1	MG	1 x od	After Meal	E
944	2783	12956	INJ ETANERCEPT 50 MG	1	NO	once in a month	After breakfast	Е
945	2784	1_000	INJ ETANERCEPT 25 MG	1	NO	1 x weekly	After Meal	E
946	2788		GLIMEPRIDE 1 MG +	1	mg	1 x od	Before Meal	Ē
340	2100			•	ilig	1 X Ou	Delote Weat	_
	000		METFORMIN 500 MG TAB				A 64 . B	
947	2793		PRAMIPEXOLE ER 1.5 MG TAB	1	MG	1 x od	After Meal	E
948	2800	12805	INJ DENOSUMAB SOLUTION	1	mg	once in a month	After Meal	E
			60 MG/ML (PROLLIA)					
949	2817		CHLORTHALIDONE 6.25 MG	1	MG	1 x od	After breakfast	٧
			TAB					
950	2828	11375	TRETINOIN 0.025 % OINT	15	GM	Local apply once a	After Meal	V
000	2020	11010	111211110111 0:020 % Onti	.0	0	day	Aitor mour	
951	2832	11060	LEUPROLIDE ACETATE 22.5	1	NO	once in a month	After Meal	٧
901	2032	11000			NO	once in a month	Aiter Wear	V
0.50			MG INJ				000	
952	2835		CLOBETASOL + MICONOZOLE	15	tube	Local apply once a	sos	E
			+GENTAMYCIN OINT			day		
						_		
953	2836		CEFIXIME 200MG +	1	MG	1 x od	After Meal	٧
			CLAVULANATE 125 MG TAB					
954	2843		DIAMOND BURS TAPER(SF-11)	1	MG	1 x od	After Meal	Е
034	2040					1 7 00	Altor Mour	_
955	2852		FLUNARIZINE 5MG TAB	1	me	1 x od	After Meal	Е
	2002	12102	FLUTICASONE PROPIONATE	10	mg Dfo			
956		12102		10	Pfs	1 Puff x OD	After Meal	E
		4555	50 MCG BP, NASAL SPRAY				4.00	_
957	2863	12905	S ADENOSYL -L-METHIONINE	1	MG	1 x od	After Meal	E
			400 MG TAB(ADESAM)					
958	2878	11522	EPLERENONE 50 MG TAB	1	MG	1 x od	After Meal	E
959	2879	10510	DONEPEZIL 10 MG TAB	1	MG	1 x od	After Meal	٧
960	2899	13408	ED BRINZOLAMIDE +	5	ML	1 Drop twice a day	After Meal	٧
			BRIMONIDINE			, _,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		-
961	2900	13296	ZIDOVUDINE 300 MG TAB	1	MG	1 x od	After Meal	Е
962	2903	13230	DULOXETINE 30 MG TAB	1	MG	1 x od	After Meal	Ē
		40502		1				
963	2908	10503	INJ NATALIZUMAB 300 MG		No	1 x od	After Meal	<u>E</u>
964	2915	11527	TORSEMIDE 20 MG TAB	1	MG	1 x od	After Meal	E
965	2924		MICROTIPS (SMALL)	1	MG	1 x od	After breakfast	E
966	2936	13270	FAROPENEM 300MG EXTD	1	MG	1 x od	After breakfast	E
			RELESE TAB					
967	2937		ROTACAP FLUTICASONE	1	MG	1 x od	After breakfast	E
			100MCG + SALMETROL 50MCG					
			TOOMOG : CALMETROE COMOG					
968				1		4 .	Before Meal	٧
	20/10							
900	2940		GLIMEPRIDE 2 MG +	1	mg	1 x od	Dororo moar	V
			METFORMIN 1000 MG SR TAB					,
969	2949		METFORMIN 1000 MG SR TAB ED LOTEPREDNOL 0.5% +	5	mg ML	1 x od 1 Drop twice a day	After breakfast	V
969	2949		METFORMIN 1000 MG SR TAB ED LOTEPREDNOL 0.5% + MOXIFLOX 0.5%	5	ML	1 Drop twice a day	After breakfast	V
969	2949 2950		METFORMIN 1000 MG SR TAB ED LOTEPREDNOL 0.5% + MOXIFLOX 0.5% MERSILK 3/0.	5	ML MG	1 Drop twice a day	After breakfast After breakfast	V
969	2949		METFORMIN 1000 MG SR TAB ED LOTEPREDNOL 0.5% + MOXIFLOX 0.5%	5	ML	1 Drop twice a day	After breakfast	V
969	2949 2950	10908	METFORMIN 1000 MG SR TAB ED LOTEPREDNOL 0.5% + MOXIFLOX 0.5% MERSILK 3/0.	5	ML MG	1 Drop twice a day	After breakfast After breakfast	V
969 970 971	2949 2950 2953	10908 11635	METFORMIN 1000 MG SR TAB ED LOTEPREDNOL 0.5% + MOXIFLOX 0.5% MERSILK 3/0. STERLLIUM 100ML BOTTLE	5 1 100	ML MG ML	1 Drop twice a day 1 x od 1 tsp x od	After breakfast After breakfast After Meal	V E E
969 970 971 972	2949 2950 2953 2958		METFORMIN 1000 MG SR TAB ED LOTEPREDNOL 0.5% + MOXIFLOX 0.5% MERSILK 3/0. STERLLIUM 100ML BOTTLE ROPINIROLE 2 MG TAB INJ ZOLEDRONIC ACID 4 MG	5 1 100 1	ML MG ML MG ml	1 Drop twice a day 1 x od 1 tsp x od 1 x od 1 x od 1 x od	After breakfast After breakfast After Meal After Meal	V E E
969 970 971 972 973	2949 2950 2953 2958 2961		METFORMIN 1000 MG SR TAB ED LOTEPREDNOL 0.5% + MOXIFLOX 0.5% MERSILK 3/0. STERLLIUM 100ML BOTTLE ROPINIROLE 2 MG TAB INJ ZOLEDRONIC ACID 4 MG METOPROLOL TARTRATE 100	5 1 100 1	ML MG ML MG	1 Drop twice a day 1 x od 1 tsp x od 1 x od	After breakfast After breakfast After Meal After Meal After Meal	V E E E
969 970 971 972 973 974	2949 2950 2953 2958 2961 2993	11635	METFORMIN 1000 MG SR TAB ED LOTEPREDNOL 0.5% + MOXIFLOX 0.5% MERSILK 3/0. STERLLIUM 100ML BOTTLE ROPINIROLE 2 MG TAB INJ ZOLEDRONIC ACID 4 MG METOPROLOL TARTRATE 100 MG TAB	5 1 100 1 1	ML MG ML MG ml	1 Drop twice a day 1 x od 1 tsp x od 1 x od 1 x od 1 x od 1 x od	After breakfast After breakfast After Meal After Meal After Meal After Meal	V E E E E
969 970 971 972 973 974	2949 2950 2953 2958 2961 2993 3000	11635 12394	METFORMIN 1000 MG SR TAB ED LOTEPREDNOL 0.5% + MOXIFLOX 0.5% MERSILK 3/0. STERLLIUM 100ML BOTTLE ROPINIROLE 2 MG TAB INJ ZOLEDRONIC ACID 4 MG METOPROLOL TARTRATE 100 MG TAB SERTRALINE 100 MG TAB	5 1 100 1 1 1	ML MG ML MG ml mg	1 Drop twice a day 1 x od 1 tsp x od 1 x od	After breakfast After breakfast After Meal After Meal After Meal After Meal After Meal	V E E E E
969 970 971 972 973 974	2949 2950 2953 2958 2961 2993 3000 3001	11635 12394 11690	METFORMIN 1000 MG SR TAB ED LOTEPREDNOL 0.5% + MOXIFLOX 0.5% MERSILK 3/0. STERLLIUM 100ML BOTTLE ROPINIROLE 2 MG TAB INJ ZOLEDRONIC ACID 4 MG METOPROLOL TARTRATE 100 MG TAB SERTRALINE 100 MG TAB SECNIDAZOLE 1000 MG TAB	5 1 100 1 1 1 1	ML MG ML MG ml mg MG MG	1 Drop twice a day 1 x od 1 tsp x od 1 x od	After breakfast After breakfast After Meal After Meal After Meal After Meal After Meal After Meal	V E E E E E
969 970 971 972 973 974 975 976 977	2949 2950 2953 2958 2961 2993 3000 3001 3002	11635 12394 11690 11614	METFORMIN 1000 MG SR TAB ED LOTEPREDNOL 0.5% + MOXIFLOX 0.5% MERSILK 3/0. STERLLIUM 100ML BOTTLE ROPINIROLE 2 MG TAB INJ ZOLEDRONIC ACID 4 MG METOPROLOL TARTRATE 100 MG TAB SERTRALINE 100 MG TAB SECNIDAZOLE 1000 MG TAB RIFAXIMINE 550 MG TAB	5 1 1000 1 1 1 1 1	ML MG ML MG ml mg MG MG MG	1 Drop twice a day 1 x od 1 tsp x od 1 x od	After breakfast After breakfast After Meal	V E E E E E E E E E E E E E E E E E E E
969 970 971 972 973 974	2949 2950 2953 2958 2961 2993 3000 3001	11635 12394 11690	METFORMIN 1000 MG SR TAB ED LOTEPREDNOL 0.5% + MOXIFLOX 0.5% MERSILK 3/0. STERLLIUM 100ML BOTTLE ROPINIROLE 2 MG TAB INJ ZOLEDRONIC ACID 4 MG METOPROLOL TARTRATE 100 MG TAB SERTRALINE 100 MG TAB SECNIDAZOLE 1000 MG TAB RIFAXIMINE 550 MG TAB INJ ZUCLOPENTHIXOL 200 MG	5 1 100 1 1 1 1	ML MG ML MG ml mg MG MG	1 Drop twice a day 1 x od 1 tsp x od 1 x od	After breakfast After breakfast After Meal After Meal After Meal After Meal After Meal After Meal	V E E E E E
969 970 971 972 973 974 975 976 977	2949 2950 2953 2958 2961 2993 3000 3001 3002 3012	11635 12394 11690 11614 17305	METFORMIN 1000 MG SR TAB ED LOTEPREDNOL 0.5% + MOXIFLOX 0.5% MERSILK 3/0. STERLLIUM 100ML BOTTLE ROPINIROLE 2 MG TAB INJ ZOLEDRONIC ACID 4 MG METOPROLOL TARTRATE 100 MG TAB SERTRALINE 100 MG TAB SECNIDAZOLE 1000 MG TAB RIFAXIMINE 550 MG TAB INJ ZUCLOPENTHIXOL 200 MG DEPOT	5 1 100 1 1 1 1 1 1	ML MG ML MG ml mg MG MG MG	1 Drop twice a day 1 x od 1 tsp x od 1 x od 0 nce in a month	After breakfast After breakfast After Meal	V E E E E E E E E
969 970 971 972 973 974 975 976 977 978	2949 2950 2953 2958 2961 2993 3000 3001 3002 3012	11635 12394 11690 11614	METFORMIN 1000 MG SR TAB ED LOTEPREDNOL 0.5% + MOXIFLOX 0.5% + MOXIFLOX 0.5% MERSILK 3/0. STERLLIUM 100ML BOTTLE ROPINIROLE 2 MG TAB INJ ZOLEDRONIC ACID 4 MG METOPROLOL TARTRATE 100 MG TAB SERTRALINE 100 MG TAB SECNIDAZOLE 1000 MG TAB RIFAXIMINE 550 MG TAB INJ ZUCLOPENTHIXOL 200 MG DEPOT FLUOXETINE 60 MG CAP	5 1 100 1 1 1 1 1 1 1 1	ML MG ML MG ml mg MG MG MG MG MG NO	1 Drop twice a day 1 x od 1 tsp x od 1 x od 0 nce in a month	After breakfast After breakfast After Meal After breakfast	V E E E E E E E
969 970 971 972 973 974 975 976 977	2949 2950 2953 2958 2961 2993 3000 3001 3002 3012 3013 3014	11635 12394 11690 11614 17305	METFORMIN 1000 MG SR TAB ED LOTEPREDNOL 0.5% + MOXIFLOX 0.5% MERSILK 3/0. STERLLIUM 100ML BOTTLE ROPINIROLE 2 MG TAB INJ ZOLEDRONIC ACID 4 MG METOPROLOL TARTRATE 100 MG TAB SERTRALINE 100 MG TAB SECNIDAZOLE 1000 MG TAB RIFAXIMINE 550 MG TAB INJ ZUCLOPENTHIXOL 200 MG DEPOT	5 1 1000 1 1 1 1 1 1 1 1 1 1	ML MG ML MG ml mg MG MG MG MO	1 Drop twice a day 1 x od 1 tsp x od 1 x od 0 once in a month	After breakfast After breakfast After Meal	V E E E E E E E E
969 970 971 972 973 974 975 976 977 978	2949 2950 2953 2958 2961 2993 3000 3001 3002 3012	11635 12394 11690 11614 17305	METFORMIN 1000 MG SR TAB ED LOTEPREDNOL 0.5% + MOXIFLOX 0.5% + MOXIFLOX 0.5% MERSILK 3/0. STERLLIUM 100ML BOTTLE ROPINIROLE 2 MG TAB INJ ZOLEDRONIC ACID 4 MG METOPROLOL TARTRATE 100 MG TAB SERTRALINE 100 MG TAB SECNIDAZOLE 1000 MG TAB RIFAXIMINE 550 MG TAB INJ ZUCLOPENTHIXOL 200 MG DEPOT FLUOXETINE 60 MG CAP	5 1 100 1 1 1 1 1 1 1 1	ML MG ML MG ml mg MG MG MG MG MG NO	1 Drop twice a day 1 x od 1 tsp x od 1 x od 0 nce in a month	After breakfast After breakfast After Meal After breakfast	V E E E E E E E
969 970 971 972 973 974 975 976 977 978	2949 2950 2953 2958 2961 2993 3000 3001 3002 3012 3013 3014	11635 12394 11690 11614 17305 12355	METFORMIN 1000 MG SR TAB ED LOTEPREDNOL 0.5% + MOXIFLOX 0.5% + MOXIFLOX 0.5% MERSILK 3/0. STERLLIUM 100ML BOTTLE ROPINIROLE 2 MG TAB INJ ZOLEDRONIC ACID 4 MG METOPROLOL TARTATE 100 MG TAB SERTRALINE 100 MG TAB SECNIDAZOLE 1000 MG TAB RIFAXIMINE 550 MG TAB INJ ZUCLOPENTHIXOL 200 MG DEPOT FLUOXETINE 60 MG CAP ANKLE WRAP	5 1 1000 1 1 1 1 1 1 1 1 1 1	ML MG ML MG MI mg MG MG MG MG MG NO	1 Drop twice a day 1 x od 1 tsp x od 1 x od 0 once in a month	After breakfast After breakfast After Meal After breakfast After breakfast	V E E E E E E E E E E E E E E E E E E E
969 970 971 972 973 974 975 976 977 978	2949 2950 2953 2958 2961 2993 3000 3001 3002 3012 3013 3014	11635 12394 11690 11614 17305 12355	METFORMIN 1000 MG SR TAB ED LOTEPREDNOL 0.5% + MOXIFLOX 0.5% MERSILK 3/0. STERLLIUM 100ML BOTTLE ROPINIROLE 2 MG TAB INJ ZOLEDRONIC ACID 4 MG METOPROLOL TARTRATE 100 MG TAB SERTRALINE 100 MG TAB SECNIDAZOLE 1000 MG TAB RIFAXIMINE 550 MG TAB INJ ZUCLOPENTHIXOL 200 MG DEPOT FLUOXETINE 60 MG CAP ANKLE WRAP GAMMA BENZENE HEXACHLORIDE 1% +	5 1 1000 1 1 1 1 1 1 1 1 1 1	ML MG ML MG MI mg MG MG MG MG MG NO	1 Drop twice a day 1 x od 1 tsp x od 1 x od 0 once in a month	After breakfast After breakfast After Meal After breakfast After breakfast	V E E E E E E E E E E E E E E E E E E E
969 970 971 972 973 974 975 976 977 978	2949 2950 2953 2958 2961 2993 3000 3001 3002 3012 3013 3014	11635 12394 11690 11614 17305 12355	METFORMIN 1000 MG SR TAB ED LOTEPREDNOL 0.5% + MOXIFLOX 0.5% MERSILK 3/0. STERLLIUM 100ML BOTTLE ROPINIROLE 2 MG TAB INJ ZOLEDRONIC ACID 4 MG METOPROLOL TARTRATE 100 MG TAB SERTRALINE 100 MG TAB SECNIDAZOLE 1000 MG TAB RIFAXIMINE 550 MG TAB RIFAXIMINE 550 MG TAB INJ ZUCLOPENTHIXOL 200 MG DEPOT FLUOXETINE 60 MG CAP ANKLE WRAP GAMMA BENZENE HEXACHLORIDE 1% + CETRIMIDE 0.1% LOTION	5 1 1000 1 1 1 1 1 1 1 1 1 1	ML MG ML MG MI mg MG MG MG MG MG NO	1 Drop twice a day 1 x od 1 tsp x od 1 x od 0 once in a month	After breakfast After breakfast After Meal After breakfast After breakfast	V E E E E E E E E E E E E E E E E E E E
969 970 971 972 973 974 975 976 977 978 979 980 981	2949 2950 2953 2958 2961 2993 3000 3001 3002 3012 3013 3014 3024	11635 12394 11690 11614 17305 12355 11336	METFORMIN 1000 MG SR TAB ED LOTEPREDNOL 0.5% + MOXIFLOX 0.5% + MOXIFLOX 0.5% - MERSILK 3/0. STERLLIUM 100ML BOTTLE ROPINIROLE 2 MG TAB INJ ZOLEDRONIC ACID 4 MG METOPROLOL TARTRATE 100 MG TAB SERTRALINE 100 MG TAB SECNIDAZOLE 1000 MG TAB RIFAXIMINE 550 MG TAB RIFAXIMINE 550 MG TAB INJ ZUCLOPENTHIXOL 200 MG DEPOT FLUOXETINE 60 MG CAP ANKLE WRAP GAMMA BENZENE HEXACHLORIDE 1% + CETRIMIDE 0.1% LOTION 100ML (GRHC)	5 1 100 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	ML MG ML MG MI mg MG MG MG MG MG MO MG MO MH	1 Drop twice a day 1 x od 1 tsp x od 1 x od once in a month 1 tsp x od	After breakfast After breakfast After Meal After breakfast LA	V E E E E E E E D D
969 970 971 972 973 974 975 976 977 978	2949 2950 2953 2958 2961 2993 3000 3001 3002 3012 3013 3014	11635 12394 11690 11614 17305 12355	METFORMIN 1000 MG SR TAB ED LOTEPREDNOL 0.5% + MOXIFLOX 0.5% MERSILK 3/0. STERLLIUM 100ML BOTTLE ROPINIROLE 2 MG TAB INJ ZOLEDRONIC ACID 4 MG METOPROLOL TARTRATE 100 MG TAB SERTRALINE 100 MG TAB SECNIDAZOLE 1000 MG TAB RIFAXIMINE 550 MG TAB RIFAXIMINE 550 MG TAB INJ ZUCLOPENTHIXOL 200 MG DEPOT FLUOXETINE 60 MG CAP ANKLE WRAP GAMMA BENZENE HEXACHLORIDE 1% + CETRIMIDE 0.1% LOTION	5 1 1000 1 1 1 1 1 1 1 1 1 1	ML MG ML MG MI mg MG MG MG MG MG NO	1 Drop twice a day 1 x od 1 tsp x od 1 x od once in a month 1 tsp x od Local apply once a	After breakfast After breakfast After Meal After breakfast After breakfast	V E E E E E E E E E E E E E E E E E E E
969 970 971 972 973 974 975 976 977 978 980 981	2949 2950 2953 2958 2961 2993 3000 3001 3002 3012 3013 3014 3024	11635 12394 11690 11614 17305 12355 11336	METFORMIN 1000 MG SR TAB ED LOTEPREDNOL 0.5% + MOXIFLOX 0.5% MERSILK 3/0. STERLLIUM 100ML BOTTLE ROPINIROLE 2 MG TAB INJ ZOLEDRONIC ACID 4 MG METOPROLOL TARTRATE 100 MG TAB SERTRALINE 100 MG TAB SECNIDAZOLE 1000 MG TAB RIFAXIMINE 550 MG TAB INJ ZUCLOPENTHIXOL 200 MG DEPOT FLUOXETINE 60 MG CAP ANKLE WRAP GAMMA BENZENE HEXACHLORIDE 1% + CETRIMIDE 0.1% LOTION 100ML (GRHC). TRETINOIN 0.05% OINT	5 1 100 1 1 1 1 1 1 1 1 1 1 1 1 1	ML MG ML MG MI mg	1 Drop twice a day 1 x od 1 tsp x od 1 x od 0 note in a month 1 tsp x od Local apply once a day	After breakfast After breakfast After Meal After breakfast LA After Meal	V E E E E E E D D
969 970 971 972 973 974 975 976 977 978 979 980 981	2949 2950 2953 2958 2961 2993 3000 3001 3002 3012 3013 3014 3024	11635 12394 11690 11614 17305 12355 11336	METFORMIN 1000 MG SR TAB ED LOTEPREDNOL 0.5% + MOXIFLOX 0.5% MERSILK 3/0. STERLLIUM 100ML BOTTLE ROPINIROLE 2 MG TAB INJ ZOLEDRONIC ACID 4 MG METOPROLOL TARTRATE 100 MG TAB SERTRALINE 100 MG TAB SECNIDAZOLE 1000 MG TAB INJ ZUCLOPENTHIXOL 200 MG DEPOT FLUOXETINE 60 MG CAP ANKLE WRAP GAMMA BENZENE HEXACHLORIDE 1% + CETRIMIDE 0.1% LOTION 100ML (GRHC) TRETINOIN 0.05% OINT	5 1 100 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	ML MG ML MG MI mg MG MG MG MG MG MO MG MO MH	1 Drop twice a day 1 x od 1 tsp x od 1 x od 0 nce in a month 1 tsp x od 1 tsp x od 0 once in a month 1 tsp x od Local apply once a day Local apply once a	After breakfast After breakfast After Meal After breakfast LA	V E E E E E E D D
969 970 971 972 973 974 975 976 977 978 980 981	2949 2950 2953 2958 2961 2993 3000 3001 3002 3012 3013 3014 3024 3028 3037	11635 12394 11690 11614 17305 12355 11336 11377 11304	METFORMIN 1000 MG SR TAB ED LOTEPREDNOL 0.5% + MOXIFLOX 0.5% MERSILK 3/0. STERLLIUM 100ML BOTTLE ROPINIROLE 2 MG TAB INJ ZOLEDRONIC ACID 4 MG METOPROLOL TARTRATE 100 MG TAB SERTRALINE 100 MG TAB SECNIDAZOLE 1000 MG TAB RIFAXIMINE 550 MG TAB RIFAXIMINE 550 MG TAB INJ ZUCLOPENTHIXOL 200 MG DEPOT FLUOXETINE 60 MG CAP ANKLE WRAP GAMMA BENZENE HEXACHLORIDE 1% + CETRIMIDE 0.1% LOTION 100ML (GRHC) TRETINOIN 0.05% OINT HALOBETASOL 0.05% OINT (CLOP)	5 1 100 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	ML MG ML MG ML MG MI mg MG MG MG MG MG MG MG NO MG	1 Drop twice a day 1 x od 1 tsp x od 1 x od 0 noce in a month 1 tsp x od Local apply once a day Local apply once a	After breakfast After breakfast After Meal After breakfast LA After Meal After breakfast After breakfast LA	V E E E E E E D D
969 970 971 972 973 974 975 976 977 978 980 981	2949 2950 2953 2958 2961 2993 3000 3001 3002 3012 3013 3014 3024 3028 3037	11635 12394 11690 11614 17305 12355 11336 11377 11304	METFORMIN 1000 MG SR TAB ED LOTEPREDNOL 0.5% + MOXIFLOX 0.5% + MOXIFLOX 0.5% - MERSILK 3/0. STERLLIUM 100ML BOTTLE ROPINIROLE 2 MG TAB INJ ZOLEDRONIC ACID 4 MG METOPROLOL TARTATE 100 MG TAB SERTRALINE 100 MG TAB SECNIDAZOLE 1000 MG TAB RIFAXIMINE 550 MG TAB INJ ZUCLOPENTHIXOL 200 MG DEPOT FLUOXETINE 60 MG CAP ANKLE WRAP GAMMA BENZENE HEXACHLORIDE 1% + CETRIMIDE 0.1% LOTION 100ML/GBHC). TRETINOIN 0.05% OINT (CLOP) OLAPARIB 150 MG TAB	5 1 100 1 1 1 1 1 1 1 1 1 1 1 1 1	ML MG ML MG ML MG MI mg MG MG MG MG MG MG NO MG MG MG NO ML	1 Drop twice a day 1 x od 1 tsp x od 1 x od 0 nce in a month 1 tsp x od Local apply once a day 1 x od 1 x od	After breakfast After breakfast After Meal After breakfast After breakfast LA After Meal After Meal	V E E E E E D D D
969 970 971 972 973 974 975 976 977 978 979 980 981	2949 2950 2953 2958 2961 2993 3000 3001 3002 3012 3013 3014 3024 3028 3037	11635 12394 11690 11614 17305 12355 11336 11377 11304	METFORMIN 1000 MG SR TAB ED LOTEPREDNOL 0.5% + MOXIFLOX 0.5% - MERSILK 3/0. STERLLIUM 100ML BOTTLE ROPINIROLE 2 MG TAB INJ ZOLEDRONIC ACID 4 MG METOPROLOL TARTATE 100 MG TAB SERTRALINE 100 MG TAB SECNIDAZOLE 1000 MG TAB RIFAXIMINE 550 MG TAB INJ ZUCLOPENTHIXOL 200 MG DEPOT FLUOXETINE 60 MG CAP ANKLE WRAP GAMMA BENZENE HEXACHLORIDE 1% + CETRIMIDE 0.1% LOTION 100ML/GBHC) TRETINOIN 0.05% OINT (CLOP) OLAPARIB 150 MG TAB AMISULPRIDE 200 MG TAB	5 1 100 1 1 1 1 1 1 1 1 1 1 1 20 1 1 1 1	ML MG ML MG ML MG MI mg MG MG MG MG MG MG MG NO ML GM GM GM GM MG MG	1 Drop twice a day 1 x od 1 tsp x od 1 x od 0 nce in a month 1 x od 1 tsp x od Local apply once a day 1 x od 1 x od 1 x od	After breakfast After breakfast After Meal After breakfast After breakfast LA After Meal After Meal After Meal	V E E E E E E D D
969 970 971 972 973 974 975 976 977 978 980 981	2949 2950 2953 2958 2961 2993 3000 3001 3002 3012 3013 3014 3024 3028 3037	11635 12394 11690 11614 17305 12355 11336 11377 11304 10779 12376	METFORMIN 1000 MG SR TAB ED LOTEPREDNOL 0.5% + MOXIFLOX 0.5% + MOXIFLOX 0.5% MERSILK 3/0. STERLLIUM 100ML BOTTLE ROPINIROLE 2 MG TAB INJ ZOLEDRONIC ACID 4 MG METOPROLOL TARTATE 100 MG TAB SERTRALINE 100 MG TAB SECNIDAZOLE 1000 MG TAB RIFAXIMINE 550 MG TAB INJ ZUCLOPENTHIXOL 200 MG DEPOT FLUOXETINE 60 MG CAP ANKLE WRAP GAMMA BENZENE HEXACHLORIDE 1% + CETRIMIDE 0.1% LOTION 100ML/GBHC) TRETINOIN 0.05% OINT (CLOP) OLAPARIB 150 MG TAB	5 1 100 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	ML MG ML MG ML MG MI mg MG MG MG MG MG MG NO MG MG MG NO ML	1 Drop twice a day 1 x od 1 tsp x od 1 x od 0 nce in a month 1 tsp x od Local apply once a day 1 x od 1 x od	After breakfast After breakfast After Meal After breakfast After breakfast LA After Meal After Meal	V E E E E E D D D
969 970 971 972 973 974 975 976 977 978 979 980 981	2949 2950 2953 2958 2961 2993 3000 3001 3002 3012 3013 3014 3024 3028 3037	11635 12394 11690 11614 17305 12355 11336 11377 11304	METFORMIN 1000 MG SR TAB ED LOTEPREDNOL 0.5% + MOXIFLOX 0.5% - MERSILK 3/0. STERLLIUM 100ML BOTTLE ROPINIROLE 2 MG TAB INJ ZOLEDRONIC ACID 4 MG METOPROLOL TARTATE 100 MG TAB SERTRALINE 100 MG TAB SECNIDAZOLE 1000 MG TAB RIFAXIMINE 550 MG TAB INJ ZUCLOPENTHIXOL 200 MG DEPOT FLUOXETINE 60 MG CAP ANKLE WRAP GAMMA BENZENE HEXACHLORIDE 1% + CETRIMIDE 0.1% LOTION 100ML/GBHC) TRETINOIN 0.05% OINT (CLOP) OLAPARIB 150 MG TAB AMISULPRIDE 200 MG TAB	5 1 100 1 1 1 1 1 1 1 1 1 1 1 20 1 1 1 1	ML MG ML MG ML MG MI mg MG MG MG MG MG MG MG NO ML GM GM GM GM MG MG	1 Drop twice a day 1 x od 1 tsp x od 1 x od 0 nce in a month 1 x od 1 tsp x od Local apply once a day 1 x od 1 x od 1 x od	After breakfast After breakfast After Meal After breakfast After breakfast LA After Meal After Meal After Meal	V E E E E E E D D D D E
969 970 971 972 973 974 975 976 977 978 980 981 982 983 984 985 986	2949 2950 2953 2958 2961 2993 3000 3001 3002 3012 3013 3014 3024 3028 3037 3045 3047 3052 3055	11635 12394 11690 11614 17305 12355 11336 11377 11304 10779 12376	METFORMIN 1000 MG SR TAB ED LOTEPREDNOL 0.5% + MOXIFLOX 0.5% MERSILK 3/0. STERLLIUM 100ML BOTTLE ROPINIROLE 2 MG TAB INJ ZOLEDRONIC ACID 4 MG METOPROLOL TARTRATE 100 MG TAB SECNIDAZOLE 1000 MG TAB SECNIDAZOLE 1000 MG TAB RIFAXIMINE 550 MG TAB RIFAXIMINE 550 MG CAP ANKLE WRAP GAMMA BENZENE HEXACHLORIDE 1% + CETRIMIDE 0.1% LOTION 100MI (GRHC) TRETINOIN 0.05% OINT (CLOP) OLAPARIB 150 MG TAB AMISULPRIDE 200 MG TAB AMISULPRIDE 200 MG TAB	5 1 100 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	ML MG ML MG ML MG MI mg	1 Drop twice a day 1 x od 1 tsp x od 1 x od 0 nce in a month 1 x od once in a month 1 tsp x od Local apply once a day Local apply once a day 1 x od	After breakfast After breakfast After Meal After breakfast LA After Meal	V E E E E E D D D D E E
969 970 971 972 973 974 975 976 977 978 980 981 982 983 984 985 986 987 988	2949 2950 2953 2958 2961 2993 3000 3001 3002 3012 3013 3014 3024 3028 3037 3045 3047 3045 3055 3059	11635 12394 11690 11614 17305 12355 11336 11377 11304 10779 12376 11396	METFORMIN 1000 MG SR TAB ED LOTEPREDNOL 0.5% + MOXIFLOX 0.5% + MOXIFLOX 0.5% + MERSILK 3/0. STERLLIUM 100ML BOTTLE ROPINIROLE 2 MG TAB INJ ZOLEDRONIC ACID 4 MG METOPROLOL TARTRATE 100 MG TAB SERTRALINE 100 MG TAB SECNIDAZOLE 1000 MG TAB RIFAXIMINE 550 MG TAB INJ ZUCLOPENTHIXOL 200 MG DEPOT FLUOXETINE 60 MG CAP ANKLE WRAP GAMMA BENZENE HEXACHLORIDE 1% + CETRIMIDE 0.1% LOTION 100ML (GBHC). TRETINOIN 0.05% OINT HALOBETASOL 0.05% OINT (CLOP) OLAPARIB 150 MG TAB AMISULPRIDE 200 MG TAB ACITRETIN 25 MG TAB CARVEDILOL 10 MG TAB	5 1 100 1 1 1 1 1 1 1 1 1 1 1 1 1	ML MG ML MG ML MG MI mg	1 Drop twice a day 1 x od 1 tsp x od 1 x od 0 nce in a month 1 tsp x od Local apply once a day 1 x od	After breakfast After breakfast After Meal After breakfast After breakfast LA After Meal	V E E E E E D D D D E E E E V
969 970 971 972 973 974 975 976 977 978 980 981 982 983 984 985 986 987	2949 2950 2953 2958 2961 2993 3000 3001 3002 3012 3013 3014 3024 3028 3037 3045 3047 3052 3055	11635 12394 11690 11614 17305 12355 11336 11377 11304 10779 12376	METFORMIN 1000 MG SR TAB ED LOTEPREDNOL 0.5% + MOXIFLOX 0.5% + MOXIFLOX 0.5% + MERSILK 3/0. STERLLIUM 100ML BOTTLE ROPINIROLE 2 MG TAB INJ ZOLEDRONIC ACID 4 MG METOPROLOL TARTRATE 100 MG TAB SERTRALINE 100 MG TAB SECNIDAZOLE 1000 MG TAB RIFAXIMINE 550 MG TAB INJ ZUCLOPENTHIXOL 200 MG DEPOT FLUOXETINE 60 MG CAP ANKLE WRAP GAMMA BENZENE HEXACHLORIDE 1% + CETRIMIDE 0.1% LOTION 100ML/GBHC) TRETINOIN 0.05% OINT (CLOP) OLAPARIB 150 MG TAB AMISULPRIDE 200 MG TAB RUXOLITINIB 20MG TAB RUXOLITINIB 20MG TAB CARVEDILOL 10 MG TAB BETAMETHASONE +	5 1 100 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	ML MG ML MG ML MG MI mg MG MG MG MG MG NO ML GM GM GM GM GM GM GM GM GM	1 Drop twice a day 1 x od 1 tsp x od 1 x od 0 nce in a month 1 tsp x od Local apply once a day 1 x od 1 x od 1 x od 1 x od 0 nce in a month 1 tsp x od	After breakfast After breakfast After Meal After breakfast LA After Meal	V
969 970 971 972 973 974 975 976 977 978 979 980 981 982 983 984 985 986 987 988	2949 2950 2953 2958 2961 2993 3000 3001 3002 3012 3013 3014 3024 3028 3037 3045 3047 3052 3055 3059 3062	11635 12394 11690 11614 17305 12355 11336 11377 11304 10779 12376 11396	METFORMIN 1000 MG SR TAB ED LOTEPREDNOL 0.5% + MOXIFLOX 0.5% MERSILK 3/0. STERLLIUM 100ML BOTTLE ROPINIROLE 2 MG TAB INJ ZOLEDRONIC ACID 4 MG METOPROLOL TARTRATE 100 MG TAB SECNIDAZOLE 1000 MG TAB SECNIDAZOLE 1000 MG TAB INJ ZUCLOPENTHIXOL 200 MG DEPOT FLUOXETINE 60 MG CAP ANKLE WRAP GAMMA BENZENE HEXACHLORIDE 1% + CETRIMIDE 0.1% LOTION 100ML (GBHC) TRETINOIN 0.05% OINT (CLOP) OLAPARIB 150 MG TAB AMISULPRIDE 200 MG TAB AMISULPRIDE 200 MG TAB RUXOLITINIB 20MG TAB ACITRETIN 25 MG TAB CARVEDILOL 10 MG TAB BETAMETHASONE + GENTAMYCIN OINT	5 1 100 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	ML MG ML MG ML MG MI mg	1 Drop twice a day 1 x od 1 tsp x od 1 x od 0 nce in a month 1 x od once in a month 1 tsp x od Local apply once a day 1 x od 1 x od 1 x od 0 nce in a month 1 tsp x od Local apply once a day 1 x od	After breakfast After breakfast After Meal After breakfast LA After Meal	V E E E E E E D D D D E E E E V D
969 970 971 972 973 974 975 976 977 978 980 981 982 983 984 985 986 987 988 989	2949 2950 2953 2958 2961 2993 3000 3001 3002 3012 3013 3014 3024 3028 3037 3045 3047 3052 3055 3059 3062	11635 12394 11690 11614 17305 12355 11336 11377 11304 10779 12376 11396 11311	METFORMIN 1000 MG SR TAB ED LOTEPREDNOL 0.5% + MOXIFLOX 0.5% MERSILK 3/0. STERLLIUM 100ML BOTTLE ROPINIROLE 2 MG TAB INJ ZOLEDRONIC ACID 4 MG METOPROLOL TARTRATE 100 MG TAB SECNIDAZOLE 1000 MG TAB RIFAXIMINE 550 MG TAB INJ ZUCLOPENTHIXOL 200 MG DEPOT FLUOXETINE 60 MG CAP ANKLE WRAP GAMMA BENZENE HEXACHLORIDE 1% + CETRIMIDE 0.1% LOTION 100ML/GRHC) TRETINOIN 0.05% OINT (CLOP) OLAPARIB 150 MG TAB AMISULPRIDE 200 MG TAB RUXOLITINIB 20MG TAB AMISULPRIDE 200 MG TAB AMISULPRIDE 200 MG TAB AMISULPRIDE 200 MG TAB CARVEDILOL 10 MG TAB BETAMETHASONE + GENTAMYCIN OINT FLUVOXAMINE 50MG TAB	5 1 100 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	ML MG ML MG ML MG MI mg MG MG MG MG MG NO ML GM MG	1 Drop twice a day 1 x od 1 tsp x od 1 x od 0 nce in a month 1 tsp x od Local apply once a day 1 x od 1 x od 1 x od 1 x od 0 nce in a month 1 tsp x od Local apply once a day 1 x od	After breakfast After breakfast After Meal After breakfast LA After Meal	V E E E E E E D D D D D D D D D D D D D
969 970 971 972 973 974 975 976 977 978 980 981 982 983 984 985 986 987 988 989 990 991	2949 2950 2953 2958 2961 2993 3000 3001 3002 3012 3013 3014 3024 3028 3037 3045 3047 3052 3059 3062 3073 3086	11635 12394 11690 11614 17305 12355 11336 11377 11304 10779 12376 11396	METFORMIN 1000 MG SR TAB ED LOTEPREDNOL 0.5% + MOXIFLOX 0.5% MERSILK 3/0. STERLLIUM 100ML BOTTLE ROPINIROLE 2 MG TAB INJ ZOLEDRONIC ACID 4 MG METOPROLOL TARTRATE 100 MG TAB SERTRALINE 100 MG TAB SECNIDAZOLE 1000 MG TAB RIFAXIMINE 550 MG TAB INJ ZUCLOPENTHIXOL 200 MG DEPOT FLUOXETINE 60 MG CAP ANKLE WRAP GAMMA BENZENE HEXACHLORIDE 1% + CETRIMIDE 0.1% LOTION 100ML(GRHC) TRETINOIN 0.05% OINT (CLOP) OLAPARIB 150 MG TAB AMISULPRIDE 20M G TAB AMISULPRIDE 20M G TAB AMISULPRIDE 20M G TAB ACITRETIN 25 MG TAB CARVEDILOL 10 MG TAB BETAMETHASONE + GENTAMYCIN OINT FLUVOXAMINE 50MG TAB METHOTREXATE 15 MG TAB METHOTREXATE 15 MG TAB	5 1 100 1 1 1 1 1 1 1 1 1 1 1 1 1	ML MG ML MG ML MG MI mg MG MG MG MG MG NO ML GM MG	1 Drop twice a day 1 x od 1 tsp x od 1 x od 0 nce in a month 1 tsp x od Local apply once a day 1 x od 1 x od 1 x od 0 nce in a month 1 tsp x od Local apply once a day 1 x od	After breakfast After breakfast After Meal After breakfast LA After Meal	V E E E E E E D D D D E E E E V D D E E E E
969 970 971 972 973 974 975 976 977 978 979 980 981 982 983 984 985 986 987 988 989	2949 2950 2953 2958 2961 2993 3000 3001 3002 3012 3013 3014 3024 3028 3037 3045 3047 3055 3059 3062 3073 3086 3087	11635 12394 11690 11614 17305 12355 11336 11377 11304 10779 12376 11396 11311 12320 13917	METFORMIN 1000 MG SR TAB ED LOTEPREDNOL 0.5% + MOXIFLOX 0.5% + MOXIFLOX 0.5% + MERSILK 3/0. STERLLIUM 100ML BOTTLE ROPINIROLE 2 MG TAB INJ ZOLEDRONIC ACID 4 MG METOPROLOL TARTRATE 100 MG TAB SERTRALINE 100 MG TAB SECNIDAZOLE 1000 MG TAB RIFAXIMINE 550 MG TAB RIFAXIMINE 550 MG TAB INJ ZUCLOPENTHIXOL 200 MG DEPOT FLUOXETINE 60 MG CAP ANKLE WRAP GAMMA BENZENE HEXACHLORIDE 1% + CETRIMIDE 0.1% LOTION 100MI (GBHC) TRETINOIN 0.05% OINT HALOBETASOL 0.05% OINT (CLOP) OLAPARIB 150 MG TAB AMISULPRIDE 200 MG TAB RUXOLITINIB 20MG TAB ACITRETIN 25 MG TAB CARVEDILOL 10 MG TAB BETAMETHASONE + GENTAMYCIN OINT FLUVOXAMINE 50MG TAB METHOTREXATE 7.5 MG TAB METHOTREXATE 7.5 MG TAB	5 1 100 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	ML MG ML MG ML MG MI mg MG MG MG MG MG NO ML GM MG	1 Drop twice a day 1 x od 1 tsp x od 1 x od 0 nce in a month 1 tsp x od Local apply once a day 1 x od	After breakfast After breakfast After Meal After breakfast After breakfast LA After Meal	V E E E E E E D D D D E E E E V D D E E E E
969 970 971 972 973 974 975 976 977 978 980 981 982 983 984 985 986 987 988 989 990 991	2949 2950 2953 2958 2961 2993 3000 3001 3002 3012 3013 3014 3024 3028 3037 3045 3047 3052 3059 3062 3073 3086	11635 12394 11690 11614 17305 12355 11336 11377 11304 10779 12376 11396 11311	METFORMIN 1000 MG SR TAB ED LOTEPREDNOL 0.5% + MOXIFLOX 0.5% MERSILK 3/0. STERLLIUM 100ML BOTTLE ROPINIROLE 2 MG TAB INJ ZOLEDRONIC ACID 4 MG METOPROLOL TARTRATE 100 MG TAB SERTRALINE 100 MG TAB SECNIDAZOLE 1000 MG TAB RIFAXIMINE 550 MG TAB INJ ZUCLOPENTHIXOL 200 MG DEPOT FLUOXETINE 60 MG CAP ANKLE WRAP GAMMA BENZENE HEXACHLORIDE 1% + CETRIMIDE 0.1% LOTION 100ML(GRHC) TRETINOIN 0.05% OINT (CLOP) OLAPARIB 150 MG TAB AMISULPRIDE 20M G TAB AMISULPRIDE 20M G TAB AMISULPRIDE 20M G TAB ACITRETIN 25 MG TAB CARVEDILOL 10 MG TAB BETAMETHASONE + GENTAMYCIN OINT FLUVOXAMINE 50MG TAB METHOTREXATE 15 MG TAB METHOTREXATE 15 MG TAB	5 1 100 1 1 1 1 1 1 1 1 1 1 1 1 1	ML MG ML MG ML MG MI mg MG MG MG MG MG NO ML GM MG	1 Drop twice a day 1 x od 1 tsp x od 1 x od 0 nce in a month 1 tsp x od Local apply once a day 1 x od 1 x od 1 x od 0 nce in a month 1 tsp x od Local apply once a day 1 x od	After breakfast After breakfast After Meal After breakfast LA After Meal	V E E E E E E D D D D E E E E V D D E E E E
969 970 971 972 973 974 975 976 977 978 989 981 982 983 984 985 986 987 988 989 990 991 992	2949 2950 2953 2958 2961 2993 3000 3001 3002 3012 3013 3014 3024 3028 3037 3045 3047 3052 3055 3059 3062 3073 3086 3087 3117	11635 12394 11690 11614 17305 12355 11336 11377 11304 10779 12376 11396 11311 12320 13917	METFORMIN 1000 MG SR TAB ED LOTEPREDNOL 0.5% + MOXIFLOX 0.5% MERSILK 3/0. STERLLIUM 100ML BOTTLE ROPINIROLE 2 MG TAB INJ ZOLEDRONIC ACID 4 MG METOPROLOL TARTRATE 100 MG TAB SERTRALINE 100 MG TAB SECNIDAZOLE 1000 MG TAB RIFAXIMINE 550 MG TAB INJ ZUCLOPENTHIXOL 200 MG DEPOT FLUOXETINE 60 MG CAP ANKLE WRAP GAMMA BENZENE HEXACHLORIDE 1% + CETRIMIDE 0.1% LOTION 100MI (GBHC) TRETINOIN 0.05% OINT (CLOP) OLAPARIB 150 MG TAB AMISULPRIDE 200 MG TAB RUXOLITINIB 20MG TAB ACITRETIN 25 MG TAB CARVEDILOL 10 MG TAB BETAMETHASONE + GENTAMYCIN OINT FLUVOXAMINE 50MG TAB METHOTREXATE 15 MG TAB METHOTREXATE 15 MG TAB METHOTREXATE 15 MG TAB METHOTREXATE 7.5 MG TAB MOXIFLOXACIN OINT	5 1 100 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	ML MG ML MG ML MG MI MG MG MG MG MG MG MG NO ML GM GM GM GM GM GM GM GM GM	1 Drop twice a day 1 x od 1 tsp x od 1 x od 0 nce in a month 1 tsp x od Local apply once a day 1 x od	After breakfast After breakfast After Meal After breakfast After breakfast LA After Meal After Meal	V E E E E E E D D D D D E E E E D D D D
969 970 971 972 973 974 975 976 977 978 979 980 981 982 983 984 985 986 987 988 989	2949 2950 2953 2958 2961 2993 3000 3001 3002 3012 3013 3014 3024 3028 3037 3045 3047 3055 3059 3062 3073 3086 3087	11635 12394 11690 11614 17305 12355 11336 11377 11304 10779 12376 11396 11311 12320 13917	METFORMIN 1000 MG SR TAB ED LOTEPREDNOL 0.5% + MOXIFLOX 0.5% + MOXIFLOX 0.5% + MERSILK 3/0. STERLLIUM 100ML BOTTLE ROPINIROLE 2 MG TAB INJ ZOLEDRONIC ACID 4 MG METOPROLOL TARTRATE 100 MG TAB SERTRALINE 100 MG TAB SECNIDAZOLE 1000 MG TAB RIFAXIMINE 550 MG TAB RIFAXIMINE 550 MG TAB INJ ZUCLOPENTHIXOL 200 MG DEPOT FLUOXETINE 60 MG CAP ANKLE WRAP GAMMA BENZENE HEXACHLORIDE 1% + CETRIMIDE 0.1% LOTION 100MI (GBHC) TRETINOIN 0.05% OINT HALOBETASOL 0.05% OINT (CLOP) OLAPARIB 150 MG TAB AMISULPRIDE 200 MG TAB RUXOLITINIB 20MG TAB ACITRETIN 25 MG TAB CARVEDILOL 10 MG TAB BETAMETHASONE + GENTAMYCIN OINT FLUVOXAMINE 50MG TAB METHOTREXATE 7.5 MG TAB METHOTREXATE 7.5 MG TAB	5 1 100 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	ML MG ML MG ML MG MI mg MG MG MG MG MG NO ML GM MG	1 Drop twice a day 1 x od 1 tsp x od 1 x od 0 nce in a month 1 tsp x od 1 tsp x od 1 x od 0 nce in a month 1 tsp x od 1 x od	After breakfast After breakfast After Meal After breakfast After breakfast LA After Meal	V E E E E E E D D D D E E E E V D D E E E E

995	3143		SODIUM CROMOGLYCATE 4%	5	ML	1 Drop twice a day	After Meal	D
			EYE DROP (CROMAL FORTE)					
996	3158	12399	TRAZODONE 25 MG TAB	1	NO	1 x od	After Meal	E
997	3161	17302	ZIPRASIDONE 20 MG	1	NO	1 x od	After Meal	E
998	3169		LANSOPRAZOLE 30 MG CAP	1	NO	1 x od	After Meal	E
999	3170		LANSOPRAZOLE 15 MG CAP	1	NO	1 x od	After Meal	V
1000	3171		DILTIAZEM CD 180 CAP/TAB	1	NO	1 x od	After Meal	E
1001	3172		DILTIAZEM CD 120 CAP/TAB	1	NO	1 x od	After Meal	V
1002	3178		DESLORATADINE 5MG TAB	1	NO	1 x od	After Meal	E
1003	3213		PALIPERIDONE OD 3 MG TAB	1	NO	1 x bd	After Meal	E
1004	3230	13204	SYP AUGMENTIN (AMOXY	100	ML	1 tsp x od	After Meal	V
			200+CLAVULANIC ACID 28.5)					
1005	3234	10318	INJ PHENIRAMINE 22.75	1	NO	1 x od	anytime	D
			MG/ML					
1006	3235		INJ DEXTORSE 5%	1	NO	sos	After Meal	D
1007	3237	10642	INJ STREPTOMYCIN 1GM	1	NO	once in a month	After Meal	D
1008	3240	11000	RUXOLITINIB 15 MG TAB	1	mg	1 x od	After Meal	D
1009	3241	10905	PRAMIPEXOLE 1 MG TAB	1	MG	1 x od	After Meal	D
1010	3242		DETTOL 500 ML BOTTLE	500	ML	once in a month	After Meal	E
1011	3244		ORTHO ARTHRITIS KNEE	1	NO	once in a month	After Meal	E
			BRACE					
1012	3249		ROLLER BANDAGE 15 CM	1	unit	sos	SOS	E
1013	3257	11013	LENALIDOMIDE 25 MG TAB	1	MG	1 x od	After Meal	E
1014	3266	10825	ERLOTINIB 150 MG TAB	1	MG	1 x od	After Meal	E
1015	3279	11071	INJ DARBEPOETIN 60 MG	1	NO	1 x weekly	After Meal	Е
1016	3283	12601	MIRABEGRON 50 MG TAB	1	MG	1 x od	After Meal	E
1017	3291	11085	INJ ROMIPLOSTIM 250 MCG	1	NO	1 x weekly	After Meal	E
1018	3294		HBS AG KIT	1	MG	1 x od	After Meal	Е
1019		11116	PERINDOPRIL 8 MG	1	MG	1 x od	After Meal	E
1020	3322		RESPULE	1	MG	1 x od	After Meal	Е
			LEVOSALBUTAMOLE 1.25 MG					
1021	3327		ENTACAPONE 200MG +	1	MG	1 x od	After Meal	Е
			LEVODOPA 150 MG +	-				_
			CARBIDOPA 37.5 TAB (
			SYNCAPONE 150)					
1022	3334		SILDENAFIL 25 MG TAB	1	MG	1 x od	After Meal	Е
1023			INJ VANCOMYCIN 250 MG	1	NO	1XOD	AFTER MEAL	V
1024	3341		INJ VANCOMYCIN 1000 MG	1	NO	1XOD	AFTER MEAL	Ē
1025		13265	INJ VANCOMYCIN 500 MG	1	NO	1 x od	After Meal	E
1026	3343	10200	DIGITAL X- RAY FILM 10 X 8""	1	NO	1 x od	After Meal	V
.020	30.0			-			7	
1027	3344		DIGITAL X- RAY FILM 12 X 10""	1	NO	1 x od	After Meal	Е
	•••			-			7	_
1028	3349	11626	SACHET PRE - PROBIOTIC (1	NO	1 x od	After Meal	Е
	33.0		FRUCTOOLIGOSACCHARIDE +	-			7	_
			BIFIDO BACTERIUM +					
			STREPTOCOCCUS +					
			LACTORACILLUS)					
1029	3354		LINAGLIPTIN 5MG +	1	mg	1 x od	After Meal	Е
.020	0004		METFORMIN 1000 MG TAB	•	9	1 X 00	Attor mour	_
1030	3356	11697	PANTOPRAZOLE 40 MG +	1	MG	1 x od	After Meal	Е
	5555	11007	LEVOSULPIRIDE 75 MG CAP	•		1 X 00	Antor mour	_
1031	3357		FOLEYS CATHETER 2 WAY	1	NO	1 x od	After Meal	Е
.001	3007		SIZE 18 F			1 X OU	Alter mear	_
1032	3375		ORTHO ARTHRITIS ANKLE	1	NO	once in a month	After Meal	Е
1032	3373		BRACE R/L		110	Once in a month	Aitei meai	_
1033	3383	11651	DICYCLOMINE 20 +	1	MG	1 x od	After Meal	Е
1033	3363	11001	PARACETAMOL 500 MG TAB	'	IVIG	1 X UU	Aitei Weai	_
1034		12215	SYP DOMPERIDONE SYP1	100	ML	1 tsp x od	After Meal	D
1034		12215		100	IVIL	i top x ou	Aiter Wear	J
1035	3400		MG/ML BOTTLE OF 30 ML SERRATIOPEPTIDASE 10MG	1	MG	1 x od	After Meal	D
1035	3400			'	IVIG	1 X OU	Aiter Wear	J
1036	3404	11301	TAB ADAPALENE 0.1% GEL	15	GM	Local apply once a	After Meal	D
1036	3404	11301	ADAFALENE 0.1% GEL	15	GIVI		Aiter wear	U
1037	3420	12060	CHLORAMPHENICAL+POLYMA	5	ML	day 1 Drop twice a day	After Meet	E
1037	3420	12060		3	IVIL	i Drop twice a day	After Meal	E
			XIN B SULPHATE +DEXA EYE					
4020	2402	12044	DROP 5ML BOTT	4	MO	4 v ad	After Mani	\/
1038	3423	13241	CLARITHROMYCIN (250MG)	1	MG	1 x od	After Meal	V
4000	0.404	40000	TAB			4	A 64 3 4	
1039	3431	10203	DICLOFENAC 50MG +PCM	1	MG	1 x od	After Meal	V
40.40		44704	500MG TAB		1400	A	A 64 1.4	_
1040		11704	FLUDROCORTISONE 0.1 MG	1	MCG	1 x od	After Meal	E
40.11	04:0	44674	TAB				40	_
1041	3448	11954	GANCYCLOVIR 250 MG TAB	1	MG	1 x od	After Meal	D
1042	3463	12734	VIT D3 60,000 IU SACHET	1	GM	1 x weekly	After Meal	E
1043	3472		LITHIUM CARBONATE SR	1	MG	1 x od	After Meal	V
			400MG TAB					
1044	3498	12407	INJ MEPOLIZUMB 100 MG	1	NO	once in a month	After Meal	V
1045		12323	HALOPERIDOL DECONATE 50	1	NO	1 x od	After Meal	D
1046	3505		MG/ML INJ THALIDOMIDE 100 MG TAB	1	MG	1 x od	After Meal	D

1047	3506	10607	TESTOSTERONE DEPOT 100MCG INJ	1	NO	once in a month	After Meal	D
1048	3507		TENOFOVIR 300 MG +	1	mg	1 x od	After Meal	D
			LAMIVUDINE 300 MG +					
			EFAVIRENZ 600 MG TAB					
1049	3513	10540	SYRUP.CARBAMAZEPINE 100	100	ML	1 tsp x od	After Meal	D
4050	0545	40540	MG/5 ML BOTTLE OF 100 ML			4	A 54 B 4 1	
1050 1051	3515 3527	10549	SOFOSBUVIR 400MG TAB MICONOZOLE	1 15	MG GM	1 x od Local apply once a	After Meal After Meal	D D
1031	3321		+FLUOCINOLONE OINT	15	GIVI	day	Aitei Weai	
1052	3529	11049	NIVOLUMAB 100 MG INJ	1	NO	1 x od	After Meal	D
1053	3532		OFLOXACIN +ORNIDAZOLE	50	ML	1 tsp x od	After Meal	D
			SYRUP			•		
1054	3539		ORNIDAZOLE	1	MG	1 x od	After Meal	٧
			500MG+OFLOXACINE 200MG					
			TAB					
1055	3550	11390	ISOTRETINOIN 10 MG TAB	1	MG	1 x od	After Meal	D
1056	3563	10584	CHLORZOXAZONE (500MG) +	1	mg	1 x od	After Meal	E
			DICLOFENAC (50MG) + PARACETAMOL (325MG) TAB					
1057	3567	12241	PHENOBARBITONE SYP 30	60	ML	1 tsp x od	After Meal	D
			MG/ML BOTT OF 60 ML					_
1058	3585	12953	INJ ETANERCEPT 25 MG	1	NO	1 x weekly	After Meal	D
1059	3586		INJ ETANERCEPT 50 MG	1	NO	1 x weekly	After Meal	D
1060	3587	14901	INJ GOLIMUMAB 50 MG	1	PFS	1 x weekly	After Meal	D
1061	3589	12902	INJ TOCILIZUMAB 200MG	1	PFS	1 x weekly	After Meal	D
1062	3591		SYP LEVOCLOPERSATINE 10	100	NO	1 tsp x od	After Meal	D
1062	2502		CARRAL TIMMEL SRI INT	4	NO	once in a menth	After Meal	-
1063 1064	3593 3595		DNS FLUID	500	NO ML	once in a month	After Meal After Meal	D V
1065	3596	120071	GAUZE SURGICAL OPEN	1	NO	SOS	After Meal	E
1003	3330	120071	WOVEN 1 MTR		140	303	Aitei Meai	_
1066	3597	10258	IBUPROFEN 400 MG TAB	1	MG	1 x od	After Meal	Е
1067	3598	12507	INJ DEXTROSE 25 %	1	NO	once in a month	After Meal	٧
1068	3599	12596	INJ DEXTROSE 50 %	1	NO	once in a month	After Meal	٧
1069	3606	12218	SYP AZITHROMYCIN 200	5	ML	sos	After Meal	D
			MG/5ML					
1070	3607		SYP POTASSIUM CHLORIDE	15	ML	sos	After Meal	D
1071	3618		(KESOL) 1.5 GM/15 ML ELBOW SUPPORT	1	NO	Local apply once a	After Meal	D
1071	3010		ELBOW SUPPORT		NO	dav	Aitei Weai	
1072	3620		HEAL PAD	1	NO	Local apply once a	After Meal	D
						dav		
1073	3622	11472	HYDROGEN PEROXYDE	1	NO	Local apply once a	After Meal	V
			SOLUTION			dav		
1074	3625	11181	HYDROCHLOROTHIAZIDE 25	1	MG	1 x od	After Meal	V
1075	3626	12901	MG TAB SULPHASALAZINE 1 GM TAB	1	MG	1 x od	Before Meal	V
1076	3628	12018	INJ CALCIUM GLUCONATE 10	1	NO	sos	After Meal	V
1010	0020	12010	%	•		000	Attor mour	•
1077	3629		INJ HYDROCORTISONE SOD	1	NO	sos	After Meal	٧
			SUCC 100 MG					
1078	3630	11508	INJ FRUSEMIDE IP 20 MG/ML	1	NO	sos	After Meal	٧
1079		10690	INJ CEFTRIAXONE 500 GM	1	NO	1XBD	AFTER MEAL	V
1080	3631	13230	INJ CEFTRIAXONE 1 GM	1	NO	1 x bd	After Meal	
1081	3632	10871	INJ ONDANSETRON 2 MG/ML	1	NO	sos	After Meal	V
1082 1083	3633 3637	11638	INJ PANTOPRAZOLE 40 MG SUSPENSARY BANDAGE	1	NO NO	sos sos	After Meal After Meal	V V
1084	3643	270145	CAPD FLUID 1.5	1	NO	1 x od	After Meal	V
1085	3644	270545C	CAPD FLUID 4.25	1	NO	1 x od	After Meal	E
1086	3661		INJ METHOTREXATE 25 MG 2	1	NO	1 x od	After Meal	E
			ML					
1087	3662		INTRA VENOUS TRANSFUSION	1	NO	once in a month	After Meal	٧
			SET					
1088	3664		DENTAL GEL	15	GM	Local apply once a	After Meal	Е
4000	2005	44045	CEDITINUD 450 MO TAE		W0	day	Aften Maria	_
1089 1090	3665 3666	11045 11769	CERITINIB 150 MG TAB GLICLAZIDE 30 MG MR TAB	1	MG MG	1 x od 1 x od	After Meal Before Meal	E E
1090	3667	10592	GLICLAZIDE 30 MG MR TAB	1	mg	1 x od	Before Meal	E
1092	5501	270715	SODIUM LACTATE RINGER	1	NO	once in a month	After Meal	V
		_,	LACTATE FLUID					
1093	3674		ISOTONIC GLUSOSE SALINE	1	NO	sos	After Meal	Е
1094	3684	11015	NILOTINIB 150 MG TAB	1	MG	1 x od	After Meal	E
		11018	INJ AZACITIDINE 100 MG	11	NO	1 x od	After Meal	E
1095	3691	11010		4	MG	1 x od	MORNING	E
1095 1096	3691 3695		PANTOPRAZOLE 20 MG TAB	1				
1095	3691	12146	XYLOMETAZOLINE	15	ML	Local apply once a	LA	E
1095 1096	3691 3695		XYLOMETAZOLINE HYDROCHLORIDE 0.1% NASEL					
1095 1096 1097	3691 3695 3701	12146	XYLOMETAZOLINE HYDROCHLORIDE 0.1% NASEL SPRAY	15	ML	Local apply once a day	LA	E
1095 1096	3691 3695		XYLOMETAZOLINE HYDROCHLORIDE 0.1% NASEL SPRAY CHLORDIAZEPOXIDE 10 MG			Local apply once a		
1095 1096 1097	3691 3695 3701	12146	XYLOMETAZOLINE HYDROCHLORIDE 0.1% NASEL SPRAY	15	ML	Local apply once a day	LA	E
1095 1096 1097	3691 3695 3701 3702	12146	XYLOMETAZOLINE HYDROCHLORIDE 0.1% NASEL SPRAY CHLORDIAZEPOXIDE 10 MG (LIBRIUM) TAB	15	MG	Local apply once a day	LA After Meal	E

4404	0=44		IN LIMETING PREPARED		NO		451 44 1	
1101	3714		INJ METHYLPREDNISOLE	1	NO	1 x od	After Meal	V
1102	3715		ACETATE 40 MG LUMBER BELT EXTRA LARGE	1	NO	sos	After Meal	D
1103	3719	10648	LEVOFLOX 250 MG TAB	1	MG	1 x od	After Meal	E
1104	3732		ACEBROPHYLLINE 200 MG SR	1	NO	1 x od	After Meal	Е
1105	3738	12456	PIRFENIDONE 200 MG	1	NO	1 x od	After Meal	E
4400	3747	11660	(PERFINEX)	1	NO	4 11 and	Defeue Meel	_
1106 1107	3747	11660	INJ DICYCLOMINE 20 MG CIC FEMALE CATHETER	1	SOS	1 x od sos	Before Meal After Meal	E
1108	3752		ADHESIVE PLASTER SIZE 7.5	10	SOS	Local apply once a	After Meal	Ē
						day		_
1109	3755	11382	KETOCONAZOLE 2% CREAM	10	ml	Local apply once a	sos	D
						day		
1110	3756	20201	INJ RABIES ANTISERUM	1	NO	1 x od	SOS After Meet	V
1111			CAP LANSOPRAZOLE 30 + CLARITHROMYCIN 250 MG +	1	MG	1 x od	After Meal	v
			TINIDAZOLE 500 MG TAB					
1112	3775	11089	DEFERASIROX 500 MG TAB	1	MG	1 x od	After Meal	٧
1113	3776	12807	INSULIN GLARGINE 450 IU/1.5	450	UNIT	10 unit x od	After Meal	٧
			ML					
1114	3786		CAPD DRAIN BAG 5 LTR	1	NO	sos	After Meal	<u> </u>
1115	3787		CAPD DRAIN BAG 15 LTR	1	NO	sos	After Meal	E
1116 1117	3788 3789		CAPD MINI CAP OINT BECLOMETHASONE +	15	NO GM	sos Local apply once a	After Meal After Meal	E
	0.00		SALICYLIC ACID	.0	J.,	day	Autor mour	_
1118	3790	13236	INJ CIPROFLOXACIN 200	1	NO	1 x od	After Meal	Е
			MG/100 ML					
1119	3791	13226	INJ CEFOTAXIME SODIUM 1	1	NO	1 x od	After Meal	E
4455	6=66		GM				A.S	_
1120 1121	3793 3794	12006	MIDODRINE 2,5 MG TAB EYE OINT CIPROFLOXACIN	1 15	MG GM	1 x od	After Meal After Meal	E V
1121	3/94	12006	ETE OINT CIPROPLOXACIN	15	GIVI	Local apply once a day	Aiter Wear	v
1122	3798	12462	FORGLYN (FORMOTEROL	1	MG	1 x od	After Meal	D
	0.00		(6MCG) + GLYCOPYRROLATE	•			7	_
			(25MCG) RESPICAPS					
			` ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' '					
1123	3800	12406	GLYCOPYRRONIUM 25 MCG	1	MG	1 x od	After Meal	D
1124	3806	10602	SMARTULES SYP ALBENDAZOLE 10 ML	10	ML	once in a month	After Meal	D
1125	3822	10586	DESMOPRESSIN 0.1 MG TAB	1	NO	1 x od	After Meal	D
1126								
	3829	1 13921	I DENOSUMAB 120 MG/ML INJ	1	l NO	sos	l After Meal	D
1127	3829 3835	13921 12112	DENOSUMAB 120 MG/ML INJ ISOTONIC NASAL SPARY	10	NO ML	sos Local apply once a	After Meal After Meal	D E
1127	3835		ISOTONIC NASAL SPARY	10	ML	Local apply once a day	After Meal	E
			ISOTONIC NASAL SPARY ALPHA LIPOIC ACID +			Local apply once a		
1127	3835		ISOTONIC NASAL SPARY ALPHA LIPOIC ACID + CHROMIUM + FOLIC ACID	10	ML	Local apply once a day	After Meal	E
1127	3835		ISOTONIC NASAL SPARY ALPHA LIPOIC ACID + CHROMIUM + FOLIC ACID METHYLCOBALAMIN +	10	ML	Local apply once a day	After Meal	E
1127	3835 3837	12112	ISOTONIC NASAL SPARY ALPHA LIPOIC ACID + CHROMIUM + FOLIC ACID METHYLCOBALAMIN + SFI FNIIM + ZINC	10 1	ML MG	Local apply once a day 1 x od	After Meal After Meal	E
1127	3835		ISOTONIC NASAL SPARY ALPHA LIPOIC ACID + CHROMIUM + FOLIC ACID METHYLCOBALAMIN +	10	ML	Local apply once a day	After Meal	E
1127 1128 1129 1130 1131	3835 3837 3840 3847 3849	12112	ISOTONIC NASAL SPARY ALPHA LIPOIC ACID + CHROMIUM + FOLIC ACID METHYLCOBALAMIN + SELENIIIM + ZINC PYRAZINAMIDE 1000 MG TAB INJ TRAMADOL INJ NORMAL SALINE 100 ML	10 1 1 1 1 1	ML MG MG NO NO	Local apply once a day 1 x od	After Meal After Meal After Meal After Meal After Meal After Meal	E E V V
1127 1128 1129 1130	3835 3837 3840 3847	12112	ISOTONIC NASAL SPARY ALPHA LIPOIC ACID + CHROMIUM + FOLIC ACID METHYLCOBALAMIN + SELENIUM + ZINC PYRAZINAMIDE 1000 MG TAB INJ TRAMADOL	10 1 1 1 1	MG MG NO	Local apply once a day 1 x od 1 x od 1 x od 1 x od	After Meal After Meal After Meal After Meal	E E V
1127 1128 1129 1130 1131 1132	3835 3837 3840 3847 3849 3852	12112 10599 10294	ISOTONIC NASAL SPARY ALPHA LIPOIC ACID + CHROMIUM + FOLIC ACID METHYLCOBALAMIN + SFI ENIIM + ZINC PYRAZINAMIDE 1000 MG TAB INJ TRAMADOL INJ NORMAL SALINE 100 ML DESVENLAFAXINE 25 MG TAB	10 1 1 1 1 1	MG MG NO NO	1 x od	After Meal	E E V V
1127 1128 1129 1130 1131 1132	3835 3837 3840 3847 3849 3852 3859	10599 10294 13253	ISOTONIC NASAL SPARY ALPHA LIPOIC ACID + CHROMIUM + FOLIC ACID METHYLCOBALAMIN + SEL ENIUM + ZINC PYRAZINAMIDE 1000 MG TAB INJ TRAMADOL INJ NORMAL SALINE 100 ML DESVENLAFAXINE 25 MG TAB INJ METRONIZADOLE IV	10 1 1 1 1 1 1	MG MG NO NO NO	1 x od 1 x od 1 x od 1 x od 1 x od 1 x od 1 x od	After Meal	E E V V E E E
1127 1128 1129 1130 1131 1132	3835 3837 3840 3847 3849 3852	12112 10599 10294	ISOTONIC NASAL SPARY ALPHA LIPOIC ACID + CHROMIUM + FOLIC ACID METHYLCOBALAMIN + SFI ENIIM + ZINC PYRAZINAMIDE 1000 MG TAB INJ TRAMADOL INJ NORMAL SALINE 100 ML DESVENLAFAXINE 25 MG TAB	10 1 1 1 1 1	MG MG NO NO	1 x od	After Meal	E E V V
1127 1128 1129 1130 1131 1132	3835 3837 3840 3847 3849 3852 3859	10599 10294 13253	ISOTONIC NASAL SPARY ALPHA LIPOIC ACID + CHROMIUM + FOLIC ACID METHYLCOBALAMIN + SEL ENIUM + ZINC PYRAZINAMIDE 1000 MG TAB INJ TRAMADOL INJ NORMAL SALINE 100 ML DESVENLAFAXINE 25 MG TAB INJ METRONIZADOLE IV	10 1 1 1 1 1 1	MG MG NO NO NO	1 x od 1 x od 1 x od 1 x od 1 x od 1 x od 1 x od	After Meal	E E V V E E E
1127 1128 1129 1130 1131 1132 1133	3835 3837 3840 3847 3849 3852 3859 3861	10599 10294 13253 10215	ISOTONIC NASAL SPARY ALPHA LIPOIC ACID + CHROMIUM + FOLIC ACID METHYLCOBALAMIN + SELENIUM + ZINC PYRAZINAMIDE 1000 MG TAB INJ TRAMADOL INJ NORMAL SALINE 100 ML DESVENLAFAXINE 25 MG TAB INJ METRONIZADOLE IV MEFENAMIC ACID 500 MG TAB	10 1 1 1 1 1 1	MG MG NO NO NO MG MG	1 x od	After Meal	E E V V E E
1127 1128 1129 1130 1131 1132 1133 1134 1135	3835 3837 3840 3847 3849 3852 3859 3861 3865 3869	10599 10294 13253 10215	ISOTONIC NASAL SPARY ALPHA LIPOIC ACID + CHROMIUM + FOLIC ACID METHYLCOBALAMIN + SEL ENIIM + 7INC PYRAZINAMIDE 1000 MG TAB INJ TRAMADOL INJ NORMAL SALINE 100 ML DESVENLAFAXINE 25 MG TAB INJ METRONIZADOLE IV MEFENAMIC ACID 500 MG TAB GOSERELIN 3.6 MG INJ INJ METHYL PREDNISOLONE 1 GM	10 1 1 1 1 1 1 1	MG MG NO NO NO MG NO	1 x od	After Meal	E E V V E E V V V
1127 1128 1129 1130 1131 1132 1133 1134 1135 1136	3835 3837 3840 3847 3849 3852 3859 3861 3865 3869	10599 10294 13253 10215 10875 10721	ISOTONIC NASAL SPARY ALPHA LIPOIC ACID + CHROMIUM + FOLIC ACID METHYLCOBALAMIN + SEL ENILIM + ZINC PYRAZINAMIDE 1000 MG TAB INJ TRAMADOL INJ NORMAL SALINE 100 ML DESVENLAFAXINE 25 MG TAB INJ METRONIZADOLE IV MEFENAMIC ACID 500 MG TAB GOSERELIN 3.6 MG INJ INJ METHYL PREDNISOLONE 1 GM QUETIAPINE SR 100 MG TAB	10 1 1 1 1 1 1 1 1	MG MG NO NO NO MG MG MG MG NO NO NO	1 x od 0 x od 0 x od 0 x od	After Meal	E E V V E E V V E E E E E
1127 1128 1129 1130 1131 1132 1133 1134 1135 1136	3835 3837 3840 3847 3849 3852 3859 3861 3865 3869 3873 3875	10599 10294 13253 10215	ISOTONIC NASAL SPARY ALPHA LIPOIC ACID + CHROMIUM + FOLIC ACID METHYLCOBALAMIN + SFLENIIIM + ZINC PYRAZINAMIDE 1000 MG TAB INJ TRAMADOL INJ NORMAL SALINE 100 ML DESVENLAFAXINE 25 MG TAB INJ METRONIZADOLE IV MEFENAMIC ACID 500 MG TAB GOSERELIN 3.6 MG INJ INJ METHYL PREDNISOLONE 1 GM QUETIAPINE SR 100 MG TAB SYP METRONIDAZOLE 60 ML	10 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	MG MG NO NO NO MG MG MG NO NO MG MG NO NO NO	Local apply once a day 1 x od	After Meal	E E V V E V V C C C C C C C C C C C C C
1127 1128 1129 1130 1131 1132 1133 1134 1135 1136 1137 1138 1139	3835 3837 3840 3847 3849 3852 3859 3861 3865 3869 3873 3875 3877	10599 10294 13253 10215 10875 10721	ISOTONIC NASAL SPARY ALPHA LIPOIC ACID + CHROMIUM + FOLIC ACID METHYLCOBALAMIN + SEL ENILIM + ZINC PYRAZINAMIDE 1000 MG TAB INJ TRAMADOL INJ NORMAL SALINE 100 ML DESVENLAFAXINE 25 MG TAB INJ METRONIZADOLE IV MEFENAMIC ACID 500 MG TAB GOSERELIN 3.6 MG INJ INJ METHYL PREDNISOLONE 1 GM QUETIAPINE SR 100 MG TAB SYP METRONIDAZOLE 60 ML LIGHT CURE CEMENT	10 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	MG NO NO NO MG MG NO NO NO NO MG MG NO	Local apply once a day 1 x od 5 x od 1 x od 5 x od 6 x od	After Meal	E E V V E E D D
1127 1128 1129 1130 1131 1132 1133 1134 1135 1136	3835 3837 3840 3847 3849 3852 3859 3861 3865 3869 3873 3875	10599 10294 13253 10215 10875 10721	ISOTONIC NASAL SPARY ALPHA LIPOIC ACID + CHROMIUM + FOLIC ACID METHYLCOBALAMIN + SFLENIIIM + ZINC PYRAZINAMIDE 1000 MG TAB INJ TRAMADOL INJ NORMAL SALINE 100 ML DESVENLAFAXINE 25 MG TAB INJ METRONIZADOLE IV MEFENAMIC ACID 500 MG TAB GOSERELIN 3.6 MG INJ INJ METHYL PREDNISOLONE 1 GM QUETIAPINE SR 100 MG TAB SYP METRONIDAZOLE 60 ML	10 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	MG MG NO NO NO MG MG MG NO NO MG MG NO NO NO	Local apply once a day 1 x od	After Meal	E E V V E V V C C C C C C C C C C C C C
1127 1128 1130 1131 1132 1133 1134 1135 1136 1137 1138 1139 1140	3835 3837 3840 3847 3849 3852 3859 3861 3865 3869 3877 3877 3882	10599 10294 13253 10215 10875 10721	ALPHA LIPOIC ACID + CHROMIUM + FOLIC ACID + CHROMIUM + FOLIC ACID METHYLCOBALAMIN + SFI ENIIIM + ZINC PYRAZINAMIDE 1000 MG TAB INJ TRAMADOL INJ NORMAL SALINE 100 ML DESVENLAFAXINE 25 MG TAB INJ METRONIZADOLE IV MEFENAMIC ACID 500 MG TAB GOSERELIN 3.6 MG INJ INJ METHYL PREDNISOLONE 1 GM QUETIAPINE SR 100 MG TAB SYP METRONIDAZOLE 60 ML LIGHT CURE CEMENT ANKLE SUPPORT	10 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	MG MG NO NO NO MG MG NO	Local apply once a day 1 x od 0 x od	After Meal	E E V V E E D D D D
1127 1128 1130 1131 1132 1133 1134 1135 1136 1137 1138 1139 1140	3835 3837 3840 3847 3849 3852 3859 3861 3865 3869 3877 3877 3882	10599 10294 13253 10215 10875 10721	ALPHA LIPOIC ACID + CHROMIUM + FOLIC ACID + CHROMIUM + FOLIC ACID METHYLCOBALAMIN + SELENILIM + ZINC PYRAZINAMIDE 1000 MG TAB INJ TRAMADOL INJ NORMAL SALINE 100 ML DESVENLAFAXINE 25 MG TAB INJ METRONIZADOLE IV MEFENAMIC ACID 500 MG TAB GOSERELIN 3.6 MG INJ INJ METHYL PREDNISOLONE 1 GM QUETIAPINE SR 100 MG TAB SYP METRONIDAZOLE 60 ML LIGHT CURE CEMENT ANKLE SUPPORT FOLEYS CATHETER 2 WAY SIZE 20 FR CATHETER FOLEYS SILICON 2	10 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	MG MG NO NO NO MG MG NO	Local apply once a day 1 x od 0 x od	After Meal	E E V V E E C D D D
1127 1128 1129 1130 1131 1132 1133 1134 1135 1136 1137 1138 1139 1140 1141	3835 3837 3840 3847 3849 3852 3859 3861 3865 3869 3877 3877 3882 3886 3887	10599 10294 13253 10215 10875 10721	ALPHA LIPOIC ACID + CHROMIUM + FOLIC ACID + CHROMIUM + FOLIC ACID METHYLCOBALAMIN + SELENIIIM + ZINC PYRAZINAMIDE 1000 MG TAB INJ TRAMADOL INJ NORMAL SALINE 100 ML DESVENLAFAXINE 25 MG TAB INJ METRONIZADOLE IV MEFENAMIC ACID 500 MG TAB GOSERELIN 3.6 MG INJ INJ METHYL PREDNISOLONE 1 GM QUETIAPINE SR 100 MG TAB SYP METRONIDAZOLE 60 ML LIGHT CURE CEMENT ANKLE SUPPORT FOLEYS CATHETER 2 WAY SIZE 20 FR CATHETER FOLEYS SILICON 2 WAY SIZE 22 FG	10 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	MG MG NO NO NO MG MG NO NO MG MG MG NO MG MG MG NO MG	Local apply once a day 1 x od 0 nce in a month 1 x od 1 tsp x od sos sos 1 x od 1 x od	After Meal	E E V V E E D D V V
1127 1128 1129 1130 1131 1132 1133 1134 1135 1136 1137 1138 1139 1140 1141 1142	3835 3837 3840 3847 3849 3852 3859 3861 3865 3869 3877 3882 3886 3887	10599 10294 13253 10215 10875 10721	ALPHA LIPOIC ACID + CHROMIUM + FOLIC ACID + CHROMIUM + FOLIC ACID METHYLCOBALAMIN + SFI ENIIIM + ZINC. PYRAZINAMIDE 1000 MG TAB INJ TRAMADOL INJ NORMAL SALINE 100 ML DESVENLAFAXINE 25 MG TAB INJ METRONIZADOLE IV MEFENAMIC ACID 500 MG TAB GOSERELIN 3.6 MG INJ INJ METHYL PREDNISOLONE 1 GM QUETIAPINE SR 100 MG TAB SYP METRONIDAZOLE 60 ML LIGHT CURE CEMENT ANKLE SUPPORT FOLEYS CATHETER 2 WAY SIZE 20 FR CATHETER FOLEYS SILICON 2 WAY SIZE 22 FG COMFORT BACK SUPPORT	10 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	MG MG NO NO NO MG MG NO NO MG MG MG NO	Local apply once a day 1 x od 0 once in a month 1 x od 1 tsp x od sos sos 1 x od 1 x od sos	After Meal	E E V V E E D D V V D
1127 1128 1129 1130 1131 1132 1133 1134 1135 1136 1137 1138 1139 1140 1141 1142	3835 3837 3840 3847 3849 3852 3859 3861 3865 3869 3873 3875 3877 3882 3886 3887	10599 10294 13253 10215 10875 10721	ALPHA LIPOIC ACID + CHROMIUM + FOLIC ACID METHYLCOBALAMIN + SELENILIM + ZINC PYRAZINAMIDE 1000 MG TAB INJ TRAMADOL INJ NORMAL SALINE 100 ML DESVENLAFAXINE 25 MG TAB INJ METRONIZADOLE IV MEFENAMIC ACID 500 MG TAB GOSERELIN 3.6 MG INJ INJ METHYL PREDNISOLONE 1 GM QUETIAPINE SR 100 MG TAB SYP METRONIDAZOLE 60 ML LIGHT CURE CEMENT ANKLE SUPPORT FOLEYS CATHETER 2 WAY SIZE 20 FR CATHETER FOLEYS SILICON 2 WAY SIZE 22 FG COMFORT BACK SUPPORT COT FINGER SPLINT	10 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	MG MG NO NO NO MG MG NO MG MG NO MG MG NO MG NO MG MG NO MG MG MG MG MG	Local apply once a day 1 x od	After Meal	E E V V E E D D D D D D D D D
1127 1128 1129 1130 1131 1132 1133 1134 1135 1136 1137 1138 1139 1140 1141 1142	3835 3837 3840 3847 3849 3852 3859 3861 3865 3869 3877 3882 3886 3887	10599 10294 13253 10215 10875 10721	ALPHA LIPOIC ACID + CHROMIUM + FOLIC ACID + CHROMIUM + FOLIC ACID METHYLCOBALAMIN + SFI ENIIIM + ZINC. PYRAZINAMIDE 1000 MG TAB INJ TRAMADOL INJ NORMAL SALINE 100 ML DESVENLAFAXINE 25 MG TAB INJ METRONIZADOLE IV MEFENAMIC ACID 500 MG TAB GOSERELIN 3.6 MG INJ INJ METHYL PREDNISOLONE 1 GM QUETIAPINE SR 100 MG TAB SYP METRONIDAZOLE 60 ML LIGHT CURE CEMENT ANKLE SUPPORT FOLEYS CATHETER 2 WAY SIZE 20 FR CATHETER FOLEYS SILICON 2 WAY SIZE 22 FG COMFORT BACK SUPPORT	10 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	MG MG NO NO NO MG MG NO NO MG MG MG NO	Local apply once a day 1 x od 0 once in a month 1 x od 1 tsp x od sos sos 1 x od 1 x od sos	After Meal	E E V V E E D D V V D
1127 1128 1129 1130 1131 1132 1133 1134 1135 1136 1137 1138 1139 1140 1141 1142	3835 3837 3840 3847 3849 3852 3859 3861 3865 3869 3873 3875 3877 3882 3886 3887	10599 10294 13253 10215 10875 10721	ALPHA LIPOIC ACID + CHROMIUM + FOLIC ACID METHYLCOBALAMIN + SELENILIM + ZINC PYRAZINAMIDE 1000 MG TAB INJ TRAMADOL INJ NORMAL SALINE 100 ML DESVENLAFAXINE 25 MG TAB INJ METRONIZADOLE IV MEFENAMIC ACID 500 MG TAB GOSERELIN 3.6 MG INJ INJ METHYL PREDNISOLONE 1 GM QUETIAPINE SR 100 MG TAB SYP METRONIDAZOLE 60 ML LIGHT CURE CEMENT ANKLE SUPPORT FOLEYS CATHETER 2 WAY SIZE 20 FR CATHETER FOLEYS SILICON 2 WAY SIZE 22 FG COMFORT BACK SUPPORT COT FINGER SPLINT	10 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	MG MG NO NO NO MG MG NO MG MG NO MG MG NO MG NO MG MG NO MG MG MG MG MG	Local apply once a day 1 x od	After Meal	E E V V E E D D D D D D D D D D
1127 1128 1129 1130 1131 1132 1133 1134 1135 1136 1137 1138 1139 1140 1141 1142 1143	3835 3837 3840 3847 3849 3852 3859 3861 3865 3869 3877 3882 3886 3887 3888 3889 3890	10599 10294 13253 10215 10875 10721	ALPHA LIPOIC ACID + CHROMIUM + FOLIC ACID METHYLCOBALAMIN + SEL ENIILM + ZINC PYRAZINAMIDE 1000 MG TAB INJ TRAMADOL INJ NORMAL SALINE 100 ML DESVENLAFAXINE 25 MG TAB INJ METRONIZADOLE IV MEFENAMIC ACID 500 MG TAB GOSERELIN 3.6 MG INJ INJ METHYL PREDNISOLONE 1 GM QUETIAPINE SR 100 MG TAB SYP METRONIDAZOLE 60 ML LIGHT CURE CEMENT ANKLE SUPPORT FOLEYS CATHETER 2 WAY SIZE 20 FR CATHETER FOLEYS SILICON 2 WAY SIZE 22 FG COMFORT BACK SUPPORT COT FINGER SPLINT DENTURE ADHESIVE POWDER FROG FINGER SPLINT SODIUM VALPROATE 500 MG	10 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	MG MG NO NO NO NO MG MG MG NO MG MG NO MG MG NO MG MG MG MG MG MG MG	Local apply once a day	After Meal	E E V V E D D D D D D D D D D D D D D D
1127 1128 1129 1130 1131 1132 1133 1134 1135 1136 1137 1138 1139 1140 1141 1142 1143 1144 1145	3835 3837 3840 3847 3849 3852 3859 3861 3865 3869 3873 3875 3877 3882 3886 3887 3888 3889 3890 3894 3913	10599 10294 13253 10215 10875 10721	ALPHA LIPOIC ACID + CHROMIUM + FOLIC ACID + SELENIUM + FOLIC ACID METHYLCOBALAMIN + SELENIUM + ZINC PYRAZINAMIDE 1000 MG TAB INJ TRAMADOL INJ NORMAL SALINE 100 ML DESVENLAFAXINE 25 MG TAB INJ METRONIZADOLE IV MEFENAMIC ACID 500 MG TAB GOSERELIN 3.6 MG INJ INJ METHYL PREDNISOLONE 1 GM QUETIAPINE SR 100 MG TAB SYP METRONIDAZOLE 60 ML LIGHT CURE CEMENT ANKLE SUPPORT FOLEYS CATHETER 2 WAY SIZE 20 FR CATHETER FOLEYS SILICON 2 WAY SIZE 22 FG COMFORT BACK SUPPORT COT FINGER SPLINT DENTURE ADHESIVE POWDER FROG FINGER SPLINT SODIUM VALPROATE 500 MG TAB	10 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	MG MG NO NO NO MG MG MG NO NO MG MG MG NO MG	Local apply once a day	After Meal	E E V V E E D D D D D V V D D D D V V
1127 1128 1129 1130 1131 1132 1133 1134 1135 1136 1137 1138 1139 1140 1141 1142 1143 1144 1145 1146 1147	3835 3837 3840 3847 3849 3852 3859 3861 3865 3869 3877 3882 3886 3887 3888 3889 3890 3894 3913	10599 10294 13253 10215 10875 10721	ALPHA LIPOIC ACID + CHROMIUM + FOLIC ACID + CHROMIUM + FOLIC ACID METHYLCOBALAMIN + SELENIIIM + ZINC PYRAZINAMIDE 1000 MG TAB INJ TRAMADOL INJ NORMAL SALINE 100 ML DESVENLAFAXINE 25 MG TAB INJ METRONIZADOLE IV MEFENAMIC ACID 500 MG TAB GOSERELIN 3.6 MG INJ INJ METHYL PREDNISOLONE 1 GM QUETIAPINE SR 100 MG TAB SYP METRONIDAZOLE 60 ML LIGHT CURE CEMENT ANKLE SUPPORT FOLEYS CATHETER 2 WAY SIZE 20 FR CATHETER FOLEYS SILICON 2 WAY SIZE 22 FG COMFORT BACK SUPPORT COT FINGER SPLINT DENTURE ADHESIVE POWDER FROG FINGER SPLINT SODIUM VALPROATE 500 MG TAB SCROTAL SUSPENSORY	10 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	MG MG NO NO NO NO MG MG NO MG MG MG NO MG MG NO MG MG NO NO MG MG MG MG NO MG MG MG MG NO	Local apply once a day	After Meal	E E V V E D D D D V D D D D D D D D D D
1127 1128 1129 1130 1131 1132 1133 1134 1135 1136 1137 1138 1139 1140 1141 1142 1143 1144 1145 1146 1147	3835 3837 3840 3847 3849 3852 3859 3861 3865 3869 3877 3882 3886 3887 3888 3889 3890 3894 3913 3914 3917	10599 10294 13253 10215 10875 10721	ALPHA LIPOIC ACID + CHROMIUM + FOLIC ACID + CHROMIUM + FOLIC ACID METHYLCOBALAMIN + SELENIIIM + ZINC PYRAZINAMIDE 1000 MG TAB INJ TRAMADOL INJ NORMAL SALINE 100 ML DESVENLAFAXINE 25 MG TAB INJ METRONIZADOLE IV MEFENAMIC ACID 500 MG TAB GOSERELIN 3.6 MG INJ INJ METHYL PREDNISOLONE 1 GM QUETIAPINE SR 100 MG TAB SYP METRONIDAZOLE 60 ML LIGHT CURE CEMENT ANKLE SUPPORT FOLEYS CATHETER 2 WAY SIZE 20 FR CATHETER FOLEYS SILICON 2 WAY SIZE 22 FG COMFORT BACK SUPPORT COT FINGER SPLINT DENTURE ADHESIVE POWDER FROG FINGER SPLINT SODIUM VALPROATE 500 MG TAB SCROTAL SUSPENSORY TENNIS ELBOW SUPPORT	10 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	MG MG NO NO NO MG MG NO NO MG MG MG NO MG MG NO MG MG NO MG	Local apply once a day	After Meal	E E V V E E D D D D V D D D D D D D D D
1127 1128 1129 1130 1131 1132 1133 1134 1135 1136 1137 1138 1139 1140 1141 1142 1143 1144 1145 1146 1147	3835 3837 3840 3847 3849 3852 3859 3861 3865 3869 3877 3882 3886 3887 3888 3889 3890 3894 3913	10599 10294 13253 10215 10875 10721	ALPHA LIPOIC ACID + CHROMIUM + FOLIC ACID + CHROMIUM + FOLIC ACID METHYLCOBALAMIN + SELENIIIM + ZINC PYRAZINAMIDE 1000 MG TAB INJ TRAMADOL INJ NORMAL SALINE 100 ML DESVENLAFAXINE 25 MG TAB INJ METRONIZADOLE IV MEFENAMIC ACID 500 MG TAB GOSERELIN 3.6 MG INJ INJ METHYL PREDNISOLONE 1 GM QUETIAPINE SR 100 MG TAB SYP METRONIDAZOLE 60 ML LIGHT CURE CEMENT ANKLE SUPPORT FOLEYS CATHETER 2 WAY SIZE 20 FR CATHETER FOLEYS SILICON 2 WAY SIZE 22 FG COMFORT BACK SUPPORT COT FINGER SPLINT DENTURE ADHESIVE POWDER FROG FINGER SPLINT SODIUM VALPROATE 500 MG TAB SCROTAL SUSPENSORY	10 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	MG MG NO NO NO NO MG MG NO MG MG MG NO MG MG NO MG MG NO NO MG MG MG MG NO MG MG MG MG NO	Local apply once a day	After Meal	E E V V E D D D D V D D D D D D D D D D
1127 1128 1129 1130 1131 1132 1133 1134 1135 1136 1137 1138 1139 1140 1141 1142 1143 1144 1145 1146 1147	3835 3837 3840 3847 3849 3852 3859 3861 3865 3869 3877 3882 3886 3887 3888 3889 3890 3894 3913 3914 3917	10599 10294 13253 10215 10875 10721	ALPHA LIPOIC ACID + CHROMIUM + FOLIC ACID + CHROMIUM + FOLIC ACID METHYLCOBALAMIN + SELENIIIM + ZINC PYRAZINAMIDE 1000 MG TAB INJ TRAMADOL INJ NORMAL SALINE 100 ML DESVENLAFAXINE 25 MG TAB INJ METRONIZADOLE IV MEFENAMIC ACID 500 MG TAB GOSERELIN 3.6 MG INJ INJ METHYL PREDNISOLONE 1 GM QUETIAPINE SR 100 MG TAB SYP METRONIDAZOLE 60 ML LIGHT CURE CEMENT ANKLE SUPPORT FOLEYS CATHETER 2 WAY SIZE 20 FR CATHETER FOLEYS SILICON 2 WAY SIZE 22 FG COMFORT BACK SUPPORT COT FINGER SPLINT DENTURE ADHESIVE POWDER FROG FINGER SPLINT SODIUM VALPROATE 500 MG TAB SCROTAL SUSPENSORY TENNIS ELBOW SUPPORT	10 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	MG MG NO NO NO MG MG NO NO MG MG MG NO MG MG NO MG MG NO MG	Local apply once a day	After Meal	E E V V E E D D D D V D D D D D D D D D
1127 1128 1129 1130 1131 1132 1133 1134 1135 1136 1137 1138 1139 1140 1141 1142 1143 1144 1145 1146 1147	3835 3837 3840 3847 3849 3852 3859 3861 3865 3869 3873 3875 3877 3882 3886 3887 3888 3889 3890 3891 3914 3917 3922	10599 10294 13253 10215 10875 10721	ALPHA LIPOIC ACID + CHROMIUM + FOLIC ACID METHYLCOBALAMIN + SELENIIJM + ZINC PYRAZINAMIDE 1000 MG TAB INJ TRAMADOL INJ NORMAL SALINE 100 ML DESVENLAFAXINE 25 MG TAB INJ METRONIZADOLE IV MEFENAMIC ACID 500 MG TAB GOSERELIN 3.6 MG INJ INJ METHYL PREDNISOLONE 1 GM QUETIAPINE SR 100 MG TAB SYP METRONIDAZOLE 60 ML LIGHT CURE CEMENT ANKLE SUPPORT FOLEYS CATHETER 2 WAY SIZE 20 FR CATHETER FOLEYS SILICON 2 WAY SIZE 22 FG COMFORT BACK SUPPORT COT FINGER SPLINT DENTURE ADHESIVE POWDER FROG FINGER SPLINT SODIUM VALPROATE 500 MG TAB SCROTAL SUSPENSORY TENNIS ELBOW SUPPORT WRIST AND FOREARM SPLINT WRIST AND FOREARM SPLINT	10 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	MG MG NO NO NO MG MG NO MG MG MG NO NO MG MG NO NO MG MG NO MG MG MG NO MG	Local apply once a day	After Meal	E E V V E E D D D D V D D D D D D D D D

1153	3947	11779	LINAGLIPTIN 2.5MG+	1	MG	1 x bd	After Meal	E
1154	3953		METFORMIN 1000 MG TAB ACETAZOLAMIDE 500 MG	1	mg	1 x od	After Meal	V
4455			(DIAMOX) TAB	4			46 14 1	
1155	3957		COLOSTOMY BAG WITH FLENGE 50MM	1	NO	sos	After Meal	D
1156	3958		COLOSTOMY BAG WITH	1	NO	sos	After Meal	D
1157	3959		FLENGE 60MM COLOSTOMY KIT WITH 100	1	NO	1 x od	After Meal	D
			BAGS					
1158		11806	INJ GLYCOPYRROLATE 0.2 MG/ML	1	mg	1x od	After meal	
1159	3977	40.04	LEVOSULPRIDE 50 MG TAB	1	MG	1 x od	After Meal	V
1160	4009	10591	GLICLAZIDE 60 MG + METFORMIN 500MG TAB	1	mg	1 x od	Before Meal	D
1161	4014	10652	INJ AMPHOTERICIN-B 50 MG	1	NO	sos	After Meal	٧
1162		13248	INJ GENTAMYCIN	1	NO	1 x od	After Meal	E
1163		10688	40MG/ML.2ML CEFOPERAZONE SODIUM 1GM	1	NO	1 XOD	AFTER MEAL	Е
			& SULBACTUM SODIUM 1GM					
1164	4031	13224	INJ CEFOPERAZONE SODIUM	1	no	1 x od	After Meal	E
1165	4032	11073	1 GM INJ MANNITOL 20% BOTT OF	1	ma	1 x od	After Meal	V
	4032		350ML		mg			-
1166		10276	INJ PARACETAMOL 150MG/ML, 2ML IV	1	NO	IXOD	AFTER MEAL	V
1167	4033	10264	INJ PARACETAMOL INFUSION	1	no	1 x od	After Meal	٧
1168	4034	10714	10MG/ML, 100ML LENALIDOMIDE 5 MG CAP	1	mg	1 x od	After Meal	E
1169	4047	10714	FOLEYS CATHETER 2 WAY	1	no	1 x od	After Meal	E
44=0	40.40		SIZE 22 FR	4		4	400 44 1	
1170	4048		FOLEYS CATHETER 2 WAY SIZE 8 FR	1	no	1 x od	After Meal	E
1171	4060	11920	UBIDECARENONE 300MG TAB	1	mg	1 x od	After Meal	Е
1172	4065		METRONIDAZOLE+CHLORHEXI	15	GM	Local apply once a	After Meal	E
			DINE +LIGNOCAIN (ORAL GEL)			day		
1173	4070	10805	LOMUSTIN 40 MG TAB	1	NO	1 x od	After Meal	D
1174	4073	12641	POVIDONE IODINE SOL 10%	100	ML	1 tsp x od	After Meal	
			BOTTLE OF 100 ML					
1175	4074	10255	CETRIZINE	1	NO	1 x od	After Meal	V
1175	4074	10255	CETRIZINE 5MG+PARACETAMOL	1	NO	1 x od	After Meal	V
1175	4074	10255	5MG+PARACETAMOL 325MG+PHENYLEPHRINE HCL	1	NO	1 x od	After Meal	V
1175	4074	10255	5MG+PARACETAMOL	1	NO NO	1 x od	After Meal WITH MEAL	V
1176	4082		5MG+PARACETAMOL 325MG+PHENYLEPHRINE HCL 5MG (COLD PLUS) GLUCOSAMINE 500 MG + DIACERIN 50 MG TAB	1	NO	1 x od	WITH MEAL	E
1176	4082 4086	13229	5MG+PARACETAMOL 325MG+PHENYLEPHRINE HCL 5MG (COLD PLUS) GLUCOSAMINE 500 MG + DIACERIN 50 MG TAB INJ CEFTAZIDIME 1 GM	1	NO NO	1 x od 1 x od	WITH MEAL	E
1176 1177 1178	4082 4086 4088		5MG+PARACETAMOL 325MG+PHENYLEPHRINE HCL 5MG (COLD PLIS) GLUCOSAMINE 500 MG + DIACERIN 50 MG TAB INJ CEFTAZIDIME 1 GM INJ TRANEXAMIC ACID	1 1 1	NO NO NO	1 x od 1 x od 1 x od	WITH MEAL WITH MEAL WITH MEAL	E E E
1176 1177 1178 1179	4082 4086 4088 4091	13229	5MG+PARACETAMOL 325MG+PHENYLEPHRINE HCL 5MG (COLD PLUS) GLUCOSAMINE 500 MG + DIACERIN 50 MG TAB INJ CEFTAZIDIME 1 GM INJ TRANEXAMIC ACID RIVAROXABAN 2.5 MG TAB	1 1 1 1	NO NO NO mg	1 x od 1 x od 1 x od 1 x od 1 x od	WITH MEAL WITH MEAL WITH MEAL After Meal	E E E V
1176 1177 1178 1179 1180	4082 4086 4088 4091 4092	13229 11032	5MG+PARACETAMOL 325MG+PHENYLEPHRINE HCL 5MG (COLD PLUS) GLUCOSAMINE 500 MG + DIACERIN 50 MG TAB INJ CEFTAZIDIME 1 GM INJ TRANEXAMIC ACID RIVAROXABAN 2.5 MG TAB SYRINGE DISPO PLASTIC 20 ML WITH NEEDLE	1 1 1 1 1	NO NO NO	1 x od 1 x od 1 x od 1 x od 1 x od	WITH MEAL WITH MEAL WITH MEAL After Meal After Meal	E E E V
1176 1177 1178 1179 1180	4082 4086 4088 4091 4092 4111	13229 11032	5MG+PARACETAMOL 325MG+PHENYLEPHRINE HCL 5MG (COLD PLUS) GLUCOSAMINE 500 MG + DIACERIN 50 MG TAB INJ CEFTAZIDIME 1 GM INJ TRANEXAMIC ACID RIVAROXABAN 2.5 MG TAB SYRINGE DISPO PLASTIC 20 ML WITH NEEDLE TEMOZOLOMIDE 100 MG TAB	1 1 1 1 1 1 1	NO NO NO mg mg mg	1 x od 1 x od 1 x od 1 x od 1 x od 1 x od 1 x od	WITH MEAL WITH MEAL WITH MEAL After Meal After Meal After Meal	E E V E
1176 1177 1178 1179 1180	4082 4086 4088 4091 4092	13229 11032	5MG+PARACETAMOL 325MG+PHENYLEPHRINE HCL 5MG (COLD PLIS) GLUCOSAMINE 500 MG + DIACERIN 50 MG TAB INJ CEFTAZIDIME 1 GM INJ TRANEXAMIC ACID RIVAROXABAN 2.5 MG TAB SYRINGE DISPO PLASTIC 20 ML WITH NEEDLE TEMOZOLOMIDE 100 MG TAB SPIRONOLACTONE 50	1 1 1 1 1	NO NO NO mg mg	1 x od 1 x od 1 x od 1 x od 1 x od	WITH MEAL WITH MEAL WITH MEAL After Meal After Meal	E E E V
1176 1177 1178 1179 1180	4082 4086 4088 4091 4092 4111	13229 11032	5MG+PARACETAMOL 325MG+PHENYLEPHRINE HCL 5MG (COLD PL IIS) GLUCOSAMINE 500 MG + DIACERIN 50 MG TAB INJ CEFTAZIDIME 1 GM INJ TRANEXAMIC ACID RIVAROXABAN 2.5 MG TAB SYRINGE DISPO PLASTIC 20 ML WITH NEEDLE TEMOZOLOMIDE 100 MG TAB SPIRONOLACTONE 50 MG(ALDECTONE) DICLOFENAC +	1 1 1 1 1 1 1	NO NO NO mg mg mg	1 x od 1 x od 1 x od 1 x od 1 x od 1 x od 1 x od	WITH MEAL WITH MEAL WITH MEAL After Meal After Meal After Meal	E E V E
1176 1177 1178 1179 1180 1181 1182	4082 4086 4088 4091 4092 4111 4125	13229 11032	5MG+PARACETAMOL 325MG+PHENYLEPHRINE HCL 5MG (COLD PLUS) GLUCOSAMINE 500 MG + DIACERIN 50 MG TAB INJ CEFTAZIDIME 1 GM INJ TRANEXAMIC ACID RIVAROXABAN 2.5 MG TAB SYRINGE DISPO PLASTIC 20 ML WITH NEEDLE TEMOZOLOMIDE 100 MG TAB SPIRONOLACTONE 50 MG(ALDECTONE) DICLOFENAC + PARACETAMOL +	1 1 1 1 1	NO NO NO mg mg mg MG	1 x od 1 x od 1 x od 1 x od 1 x od 1 x od 1 x od	WITH MEAL WITH MEAL WITH MEAL After Meal After Meal After Meal After Meal	E
1176 1177 1178 1179 1180 1181 1182	4082 4086 4088 4091 4092 4111 4125 4135	13229 11032	5MG+PARACETAMOL 325MG+PHENYLEPHRINE HCL 5MG (COLD PLIS) GLUCOSAMINE 500 MG + DIACERIN 50 MG TAB INJ CEFTAZIDIME 1 GM INJ TRANEXAMIC ACID RIVAROXABAN 2.5 MG TAB SYRINGE DISPO PLASTIC 20 ML WITH NEEDLE TEMOZOLOMIDE 100 MG TAB SPIRONOLACTONE 50 MG(ALDECTONE) DICLOFENAC + PARACETAMOL + SERRATIOPEPTIDASE TAB	1 1 1 1 1	NO NO NO mg mg MG NO	1 x od 1 x od 3 x od 5 x od 5 x od 5 x od 5 x od 5 x od 5 x od 6 x od 6 x od 7 x od 8 x od	WITH MEAL WITH MEAL WITH MEAL After Meal After Meal After Meal After Meal After Meal	E E V E
1176 1177 1178 1179 1180 1181 1182	4082 4086 4088 4091 4092 4111 4125	13229 11032	5MG+PARACETAMOL 325MG+PHENYLEPHRINE HCL 5MG (COLD PLUS) GLUCOSAMINE 500 MG + DIACERIN 50 MG TAB INJ CEFTAZIDIME 1 GM INJ TRANEXAMIC ACID RIVAROXABAN 2.5 MG TAB SYRINGE DISPO PLASTIC 20 ML WITH NEEDLE TEMOZOLOMIDE 100 MG TAB SPIRONOLACTONE 50 MG(ALDECTONE) DICLOFENAC + PARACETAMOL +	1 1 1 1 1 1 1	NO NO NO mg mg mg MG	1 x od 1 x od 1 x od 1 x od 1 x od 1 x od 1 x od	WITH MEAL WITH MEAL WITH MEAL After Meal After Meal After Meal After Meal	E
1176 1177 1178 1179 1180 1181 1182 1183	4082 4086 4088 4091 4092 4111 4125 4135	13229 11032	5MG+PARACETAMOL 325MG+PHENYLEPHRINE HCL 5MG (COLD PLUS) GLUCOSAMINE 500 MG + DIACERIN 50 MG TAB INJ CEFTAZIDIME 1 GM INJ TRANEXAMIC ACID RIVAROXABAN 2.5 MG TAB SYRINGE DISPO PLASTIC 20 ML WITH NEEDLE TEMOZOLOMIDE 100 MG TAB SPIRONOLACTONE 50 MG(ALDECTONE) DICLOFENAC + PARACETAMOL + SERRATIOPEPTIDASE TAB KNEE IIMMOBILIZER	1 1 1 1 1 1 1	NO NO NO mg mg MG NO NO	1 x od 3 x od 5 x od 5 x od 5 x od 5 x od	WITH MEAL WITH MEAL WITH MEAL After Meal After Meal After Meal After Meal After Meal After Meal	E E V V V
1176 1177 1178 1179 1180 1181 1182 1183 1184 1185 1186 1187	4082 4086 4088 4091 4092 4111 4125 4135 4140 4154 4161 4162	13229 11032	5MG+PARACETAMOL 325MG+PHENYLEPHRINE HCL 5MG (COLD PLUS) GLUCOSAMINE 500 MG + DIACERIN 50 MG TAB INJ CEFTAZIDIME 1 GM INJ TRANEXAMIC ACID RIVAROXABAN 2.5 MG TAB SYRINGE DISPO PLASTIC 20 ML WITH NEEDLE TEMOZOLOMIDE 100 MG TAB SPIRONOLACTONE 50 MG(ALDECTONE) DICLOFENAC + PARACETAMOL + SERRATIOPEPTIDASE TAB KNEE IIMMOBILIZER NAPROXEN 500 MG TAB DENTURE ADHESIVE TUBE INJ ADENOSINE 3MG	1 1 1 1 1 1 1 1 1	NO NO NO Mg mg mg MG NO NO NO mg	1 x od 5 sos	WITH MEAL WITH MEAL WITH MEAL After Meal	E E V V V E E E E E E E
1176 1177 1178 1179 1180 1181 1182 1183 1184 1185 1186	4082 4086 4088 4091 4092 4111 4125 4135 4140 4154 4161	13229 11032 10854 11524	5MG+PARACETAMOL 325MG+PHENYLEPHRINE HCL 5MG (COLD PLUS) GLUCOSAMINE 500 MG + DIACERIN 50 MG TAB INJ CEFTAZIDIME 1 GM INJ TRANEXAMIC ACID RIVAROXABAN 2.5 MG TAB SYRINGE DISPO PLASTIC 20 ML WITH NEEDLE TEMOZOLOMIDE 100 MG TAB SPIRONOLACTONE 50 MG(ALDECTONE) DICLOFENAC + PARACETAMOL + SERRATIOPEPTIDASE TAB KNEE IIMMOBILIZER NAPROXEN 500 MG TAB DENTURE ADHESIVE TUBE INJ ADENOSINE 3MG INTER DENTAL CLEANING	1 1 1 1 1 1 1 1	NO NO NO Mg mg MG NO NO NO nno nno	1 x od 5 sos	WITH MEAL WITH MEAL WITH MEAL After Meal	E E V V V E E E E E
1176 1177 1178 1179 1180 1181 1182 1183 1184 1185 1186 1187	4082 4086 4088 4091 4092 4111 4125 4135 4140 4154 4161 4162	13229 11032 10854 11524	5MG+PARACETAMOL 325MG+PHENYLEPHRINE HCL 5MG (COLD PLUS) GLUCOSAMINE 500 MG + DIACERIN 50 MG TAB INJ CEFTAZIDIME 1 GM INJ TRANEXAMIC ACID RIVAROXABAN 2.5 MG TAB SYRINGE DISPO PLASTIC 20 ML WITH NEEDLE TEMOZOLOMIDE 100 MG TAB SPIRONOLACTONE 50 MG(ALDECTONE) DICLOFENAC + PARACETAMOL + SERRATIOPEPTIDASE TAB KNEE IIMMOBILIZER NAPROXEN 500 MG TAB DENTURE ADHESIVE TUBE INJ ADENOSINE 3MG	1 1 1 1 1 1 1 1 1	NO NO NO Mg mg MG NO NO NO no no	1 x od 5 x od 1 x od 1 x od 5	WITH MEAL WITH MEAL WITH MEAL After Meal	E E V V V E E E E E E E
1176 1177 1178 1179 1180 1181 1182 1183 1184 1185 1186 1187	4082 4086 4088 4091 4092 4111 4125 4135 4140 4154 4161 4162 4163	13229 11032 10854 11524	5MG+PARACETAMOL 325MG+PHENYLEPHRINE HCL 5MG (COLD PLUS) GLUCOSAMINE 500 MG + DIACERIN 50 MG TAB INJ CEFTAZIDIME 1 GM INJ TRANEXAMIC ACID RIVAROXABAN 2.5 MG TAB SYRINGE DISPO PLASTIC 20 ML WITH NEEDLE TEMOZOLOMIDE 100 MG TAB SPIRONOLACTONE 50 MG(ALDECTONE) DICLOFENAC + PARACETAMOL + SERRATIOPEPTIDASE TAB KNEE IIMMOBILIZER NAPROXEN 500 MG TAB DENTURE ADHESIVE TUBE INJ ADENOSINE 3MG INTER DENTAL CLEANING ADD / FLOSS	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	NO NO NO Mg mg mg MG NO NO mg	1 x od 50s 50s 50s 50s 50s	WITH MEAL WITH MEAL WITH MEAL After Meal	E E V V V V E E E E E E E E E E E E E E
1176 1177 1178 1179 1180 1181 1182 1183 1184 1185 1186 1187 1188	4082 4086 4088 4091 4092 4111 4125 4135 4140 4154 4161 4162 4163 4164 4165	13229 11032 10854 11524	5MG+PARACETAMOL 325MG+PHENYLEPHRINE HCL 5MG (COLD PLUS) GLUCOSAMINE 500 MG + DIACERIN 50 MG TAB INJ CEFTAZIDIME 1 GM INJ TRANEXAMIC ACID RIVAROXABAN 2.5 MG TAB SYRINGE DISPO PLASTIC 20 ML WITH NEEDLE TEMOZOLOMIDE 100 MG TAB SPIRONOLACTONE 50 MG(ALDECTONE) DICLOFENAC + PARACETAMOL + SERRATIOPEPTIDASE TAB KNEE IIMMOBILIZER NAPROXEN 500 MG TAB DENTURE ADHESIVE TUBE INJ ADENOSINE 3MG INTER DENTAL CLEANING ADD / FLOSS BELLOW FOR BP APPARATUS	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	NO NO NO NO mg mg MG NO NO no no no no	1 x od Sos sos sos sos sos sos sos s	WITH MEAL WITH MEAL WITH MEAL After Meal	E E V V V E E E E E E E E E E E E E E E
1176 1177 1178 1179 1180 1181 1182 1183 1184 1185 1186 1187 1188 1189 1190 1191	4082 4086 4088 4091 4092 4111 4125 4135 4140 4154 4161 4162 4163 4164 4165 4168	13229 11032 10854 11524 11121	5MG+PARACETAMOL 325MG+PHENYLEPHRINE HCL 5MG (COLD PLI IS) GLUCOSAMINE 500 MG + DIACERIN 50 MG TAB INJ CEFTAZIDIME 1 GM INJ TRANEXAMIC ACID RIVAROXABAN 2.5 MG TAB SYRINGE DISPO PLASTIC 20 ML WITH NEEDLE TEMOZOLOMIDE 100 MG TAB SPIRONOLACTONE 50 MG(ALDECTONE) DICLOFENAC + PARACETAMOL + SERRATIOPEPTIDASE TAB KNEE IIMMOBILIZER NAPROXEN 500 MG TAB DENTURE ADHESIVE TUBE INJ ADENOSINE 3MG INTER DENTAL CLEANING ADD / FLOSS BELLOW FOR BP APPARATUS ARMLET RUBBER FOR BP APPARATUS EFAVIRENZ 600 MG TAB	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	NO NO NO mg mg mg MG NO no no no no mg no	1 x od 5 sos	WITH MEAL WITH MEAL WITH MEAL After Meal	E E E E E E E E E E E E E E E E E E E
1176 1177 1178 1179 1180 1181 1182 1183 1184 1185 1186 1187 1188 1189 1190 1191	4082 4086 4088 4091 4092 4111 4125 4135 4140 4154 4161 4162 4163 4164 4165 4168 4169	13229 11032 10854 11524 11121 13295 11008	5MG+PARACETAMOL 325MG+PHENYLEPHRINE HCL 5MG (COLD PLUS) GLUCOSAMINE 500 MG + DIACERIN 50 MG TAB INJ CEFTAZIDIME 1 GM INJ TRANEXAMIC ACID RIVAROXABAN 2.5 MG TAB SYRINGE DISPO PLASTIC 20 ML WITH NEEDLE TEMOZOLOMIDE 100 MG TAB SPIRONOLACTONE 50 MG(ALDECTONE) DICLOFENAC + PARACETAMOL + SERRATIOPEPTIDASE TAB KNEE IIMMOBILIZER NAPROXEN 500 MG TAB DENTURE ADHESIVE TUBE INJ ADENOSINE 3MG INTER DENTAL CLEANING ADD / FLOSS BELLOW FOR BP APPARATUS ARMLET RUBBER FOR BP APPARATUS EFAVIRENZ 600 MG TAB DEFERASIROX 400 MG TAB	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	NO NO NO Mg mg mg MG NO NO no no no no mg mg mg	1 x od 50s 50s 50s 50s 50s 50s 50s 50s 50s 50	WITH MEAL WITH MEAL WITH MEAL After Meal	E E E E E E E E E E E E E E E E E E E
1176 1177 1178 1179 1180 1181 1182 1183 1184 1185 1186 1187 1188 1189 1190 1191	4082 4086 4088 4091 4092 4111 4125 4135 4140 4154 4161 4162 4163 4164 4165 4168	13229 11032 10854 11524 11121	5MG+PARACETAMOL 325MG+PHENYLEPHRINE HCL 5MG (COLD PLI IS) GLUCOSAMINE 500 MG + DIACERIN 50 MG TAB INJ CEFTAZIDIME 1 GM INJ TRANEXAMIC ACID RIVAROXABAN 2.5 MG TAB SYRINGE DISPO PLASTIC 20 ML WITH NEEDLE TEMOZOLOMIDE 100 MG TAB SPIRONOLACTONE 50 MG(ALDECTONE) DICLOFENAC + PARACETAMOL + SERRATIOPEPTIDASE TAB KNEE IIMMOBILIZER NAPROXEN 500 MG TAB DENTURE ADHESIVE TUBE INJ ADENOSINE 3MG INTER DENTAL CLEANING ADD / FLOSS BELLOW FOR BP APPARATUS ARMLET RUBBER FOR BP APPARATUS EFAVIRENZ 600 MG TAB	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	NO NO NO Mg mg mg MG NO NO no no no mg mg mg no no no ml	1 x od 5 sos	WITH MEAL WITH MEAL WITH MEAL After Meal	E E E E E E E E E E E E E E E E E E E
1176 1177 1178 1179 1180 1181 1182 1183 1184 1185 1186 1187 1188 1189 1190 1191 1192 1193	4082 4086 4088 4091 4092 4111 4125 4135 4140 4154 4161 4162 4163 4164 4165 4168 4169	13229 11032 10854 11524 11121 13295 11008	5MG+PARACETAMOL 325MG+PHENYLEPHRINE HCL 5MG_(COLD.P.I.IS). GLUCOSAMINE 500 MG + DIACERIN 50 MG TAB INJ CEFTAZIDIME 1 GM INJ TRANEXAMIC ACID RIVAROXABAN 2.5 MG TAB SYRINGE DISPO PLASTIC 20 ML WITH NEEDLE TEMOZOLOMIDE 100 MG TAB SPIRONOLACTONE 50 MG(ALDECTONE) DICLOFENAC + PARACETAMOL + SERRATIOPEPTIDASE TAB KNEE IIMMOBILIZER NAPROXEN 500 MG TAB DENTURE ADHESIVE TUBE INJ ADENOSINE 3MG INTER DENTAL CLEANING ADD / FLOSS BELLOW FOR BP APPARATUS ARMLET RUBBER FOR BP APPARATUS EFAVIRENZ 600 MG TAB DEFERASIROX 400 MG TAB SYP PHENYTOIN SOD 200 ML LACOSAMIDE 50 MG TAB HYOSCINE BUTYLBROMIDE	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	NO NO NO Mg mg mg MG NO NO no no no no mg mg mg	1 x od 5 x os 5	WITH MEAL WITH MEAL WITH MEAL After Meal	E E E E E E E E E E E E E E E E E E E
1176 1177 1178 1179 1180 1181 1182 1183 1184 1185 1186 1187 1188 1190 1191 1192 1193 1194 1195	4082 4086 4088 4091 4092 4111 4125 4135 4140 4154 4161 4162 4163 4164 4165 4168 4169 4175	13229 11032 10854 11524 11121 11121 13295 11008 10553	5MG+PARACETAMOL 325MG+PHENYLEPHRINE HCL 5MG (COLD PLUS) GLUCOSAMINE 500 MG + DIACERIN 50 MG TAB INJ CEFTAZIDIME 1 GM INJ TRANEXAMIC ACID RIVAROXABAN 2.5 MG TAB SYRINGE DISPO PLASTIC 20 ML WITH NEEDLE TEMOZOLOMIDE 100 MG TAB SPIRONOLACTONE 50 MG(ALDECTONE) DICLOFENAC + PARACETAMOL + SERRATIOPEPTIDASE TAB KNEE IIMMOBILIZER NAPROXEN 500 MG TAB DENTURE ADHESIVE TUBE INJ ADENOSINE 3MG INTER DENTAL CLEANING ADD / FLOSS BELLOW FOR BP APPARATUS ARMLET RUBBER FOR BP APPARATUS EFAVIRENZ 600 MG TAB DEFERASIROX 400 MG TAB SYP PHENYTOIN SOD 200 ML LACOSAMIDE 50 MG TAB HYOSCINE BUTYLBROMIDE INJECTION 20MG/ML	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	NO NO NO Mg mg mg MG NO NO mg no no no mg mg no no no no no mg mg mg mg no no no	1 x od 5 sos 5 s	WITH MEAL WITH MEAL WITH MEAL After Meal	E E E E E E E E E E E E E E E E E E E
1176 1177 1178 1179 1180 1181 1182 1183 1184 1185 1186 1187 1188 1189 1190 1191 1192 1193 1194	4082 4086 4088 4091 4092 4111 4125 4135 4140 4161 4162 4163 4164 4165 4168 4169 4175	13229 11032 10854 11524 11121 11121 13295 11008 10553	5MG+PARACETAMOL 325MG+PHENYLEPHRINE HCL 5MG_(COLD.P.I.IS). GLUCOSAMINE 500 MG + DIACERIN 50 MG TAB INJ CEFTAZIDIME 1 GM INJ TRANEXAMIC ACID RIVAROXABAN 2.5 MG TAB SYRINGE DISPO PLASTIC 20 ML WITH NEEDLE TEMOZOLOMIDE 100 MG TAB SPIRONOLACTONE 50 MG(ALDECTONE) DICLOFENAC + PARACETAMOL + SERRATIOPEPTIDASE TAB KNEE IIMMOBILIZER NAPROXEN 500 MG TAB DENTURE ADHESIVE TUBE INJ ADENOSINE 3MG INTER DENTAL CLEANING ADD / FLOSS BELLOW FOR BP APPARATUS ARMLET RUBBER FOR BP APPARATUS EFAVIRENZ 600 MG TAB DEFERASIROX 400 MG TAB SYP PHENYTOIN SOD 200 ML LACOSAMIDE 50 MG TAB HYOSCINE BUTYLBROMIDE	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	NO NO NO NO mg mg mg MG NO NO no no no no mg	1 x od 50s 50s 50s 50s 50s 50s 50s 1 x od	WITH MEAL WITH MEAL WITH MEAL After Meal	E E E E E E E E E E E E E E E E E E E
1176 1177 1178 1179 1180 1181 1182 1183 1184 1185 1186 1187 1188 1190 1191 1192 1193 1194 1195	4082 4086 4088 4091 4092 4111 4125 4135 4140 4154 4161 4162 4163 4164 4165 4168 4169 4175 4185	13229 11032 10854 11524 11524 11121 13295 11008 10553	5MG+PARACETAMOL 325MG+PHENYLEPHRINE HCL 5MG_(COLD.P.I.IS). GLUCOSAMINE 500 MG + DIACERIN 50 MG TAB INJ CEFTAZIDIME 1 GM INJ TRANEXAMIC ACID RIVAROXABAN 2.5 MG TAB SYRINGE DISPO PLASTIC 20 ML WITH NEEDLE TEMOZOLOMIDE 100 MG TAB SPIRONOLACTONE 50 MG(ALDECTONE) DICLOFENAC + PARACETAMOL + SERRATIOPEPILDASE TAB KNEE IIMMOBILIZER NAPROXEN 500 MG TAB DENTURE ADHESIVE TUBE INJ ADENOSINE 3MG INTER DENTAL CLEANING ADD / FLOSS BELLOW FOR BP APPARATUS ARMLET RUBBER FOR BP APPARATUS EFAVIRENZ 600 MG TAB DEFERASIROX 400 MG TAB SYP PHENYTOIN SOD 200 ML LACOSAMIDE 50 MG TAB HYOSCINE BUTYLBROMIDE INJECTION 20MG/ML PANTAPROZOLE 40 MG + DOMPERIDONE 10 MG (PAN D)	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	NO NO NO mg mg mg MG NO NO mg no no no ml no mg	1 x od 50s 50s 50s 50s 50s 50s 50s 1 x od	WITH MEAL WITH MEAL WITH MEAL After Meal	E E E E E E E E E E E E E E E E E E E
1176 1177 1178 1179 1180 1181 1182 1183 1184 1185 1186 1187 1188 1190 1191 1192 1193 1194 1195	4082 4086 4088 4091 4092 4111 4125 4135 4140 4154 4161 4162 4163 4164 4165 4168 4169 4175	13229 11032 10854 11524 11121 11121 13295 11008 10553	5MG+PARACETAMOL 325MG+PHENYLEPHRINE HCL 5MG (COLD PLUS) GLUCOSAMINE 500 MG + DIACERIN 50 MG TAB INJ CEFTAZIDIME 1 GM INJ TRANEXAMIC ACID RIVAROXABAN 2.5 MG TAB SYRINGE DISPO PLASTIC 20 ML WITH NEEDLE TEMOZOLOMIDE 100 MG TAB SPIRONOLACTONE 50 MG(ALDECTONE) DICLOFENAC + PARACETAMOL + SERRATIOPEPTIDASE TAB KNEE IIMMOBILIZER NAPROXEN 500 MG TAB DENTURE ADHESIVE TUBE INJ ADENOSINE 3MG INTER DENTAL CLEANING ADD / FLOSS BELLOW FOR BP APPARATUS ARMLET RUBBER FOR BP ADD / FLOSS BELLOW FOR BP APPARATUS EFAVIRENZ 600 MG TAB SYP PHENYTOIN SOD 200 ML LACOSAMIDE 50 MG TAB HYOSCINE BUTYLBROMIDE INJECTION 20MG/ML PANTAPROZOLE 40 MG + DOMPERIDONE 10 MG (PAN D) INJ ADRENALINE 1:1000 1 ML INJ ARTESUNATE 60MG	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	NO NO NO Mg mg mg MG NO NO mg no no no mg mg no no no no no mg mg mg mg no no no	1 x od 5 sos 5 s	WITH MEAL WITH MEAL WITH MEAL After Meal	E E E E E E E E E E E E E E E E E E E
1176 1177 1178 1179 1180 1181 1182 1183 1184 1185 1186 1187 1188 1190 1191 1192 1193 1194 1195 1196	4082 4086 4088 4091 4092 4111 4125 4135 4140 4154 4161 4162 4163 4164 4165 4168 4169 4175 4185 4190	13229 11032 10854 11524 11524 11121 13295 11008 10553 11669	5MG+PARACETAMOL 325MG+PHENYLEPHRINE HCL 5MG (COLD PLUS) GLUCOSAMINE 500 MG + DIACERIN 50 MG TAB INJ CEFTAZIDIME 1 GM INJ TRANEXAMIC ACID RIVAROXABAN 2.5 MG TAB SYRINGE DISPO PLASTIC 20 ML WITH NEEDLE TEMOZOLOMIDE 100 MG TAB SPIRONOLACTONE 50 MG(ALDECTONE) DICLOFENAC + PARACETAMOL + SERRATIOPEPTIDASE TAB KNEE IIMMOBILIZER NAPROXEN 500 MG TAB DENTURE ADHESIVE TUBE INJ ADENOSINE 3MG INTER DENTAL CLEANING ADD / FLOSS BELLOW FOR BP APPARATUS ARMLET RUBBER FOR BP APPARATUS EFAVIRENZ 600 MG TAB SYP PHENYTOIN SOD 200 ML LACOSAMIDE 50 MG TAB HYOSCINE BUTYLBROMIDE INJECTION 20MG/ML PANTAPROZOLE 40 MG + DOMPERIDONE 10 MG (PAN D) INJ ADRENALINE 1:1000 1 ML INJ ARTESUNATE 60MG PARAFFIN SOFT YELLOW	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	NO NO NO Mg mg mg MG NO NO mg no no no ml no mg mg mg MG NO NO MG NO MG NO MG NO MG NO MG NO NO MG NO	1 x od 5 sos 5 s	WITH MEAL WITH MEAL WITH MEAL After Meal	E E E E E E E E E E E E E E E E E E E
1176 1177 1178 1179 1180 1181 1182 1183 1184 1185 1186 1187 1188 1190 1191 1192 1193 1194 1195 1196 1197 1198	4082 4086 4088 4091 4092 4111 4125 4135 4135 4140 4154 4161 4162 4163 4164 4165 4168 4169 4175 4185 4190	13229 11032 10854 11524 11524 11121 13295 11008 10553 11669	5MG+PARACETAMOL 325MG+PHENYLEPHRINE HCL 5MG (COLD PLUS) GLUCOSAMINE 500 MG + DIACERIN 50 MG TAB INJ CEFTAZIDIME 1 GM INJ TRANEXAMIC ACID RIVAROXABAN 2.5 MG TAB SYRINGE DISPO PLASTIC 20 ML WITH NEEDLE TEMOZOLOMIDE 100 MG TAB SPIRONOLACTONE 50 MG(ALDECTONE) DICLOFENAC + PARACETAMOL + SERRATIOPEPTIDASE TAB KNEE IIMMOBILIZER NAPROXEN 500 MG TAB DENTURE ADHESIVE TUBE INJ ADENOSINE 3MG INTER DENTAL CLEANING ADD / FLOSS BELLOW FOR BP APPARATUS ARMLET RUBBER FOR BP ADD / FLOSS BELLOW FOR BP APPARATUS EFAVIRENZ 600 MG TAB SYP PHENYTOIN SOD 200 ML LACOSAMIDE 50 MG TAB HYOSCINE BUTYLBROMIDE INJECTION 20MG/ML PANTAPROZOLE 40 MG + DOMPERIDONE 10 MG (PAN D) INJ ADRENALINE 1:1000 1 ML INJ ARTESUNATE 60MG	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	NO NO NO Mg mg mg MG NO NO mg no no no mi no mg mg mg MG NO NO NO NO MO	1 x od 5 sos 5 s	WITH MEAL WITH MEAL WITH MEAL After Meal	E E E E E E E E E V V V V V V

				_				
1201	4209		ANKLE STRAP XXL	1	NO	sos	SOS	E
1202	4211	10121	INJ LIGNOCAINE 2% WITH	1	NO	sos	After Meal	٧
4000	4044		ADRENALINE		110	4 .	400 88 1	.,
1203	4214 4227		MEFLOQUINE 250MG TAB	1	NO NO	1 x od	After Meal	<u>v</u>
1204	4221		CHEST BRACE WITH STERNAL	1	NO	1 x od	After Meal	E
1205	4233		SPLINT HERNIA BELT	1	NO	sos	sos	Е
1205	4239	11907	MYCOPHENOLATE SODIUM	1	NO	1 x od	After Meal	Ē
1200	4233	11907	180 MG TAB		NO	1 X Ou	Aitei weai	_
1207	4240	11908	MYCOPHENOLATE 750MG TAB	1	NO	1 x od	After Meal	Е
1207	7270	11300	INTOOFTIENCEATE 730MG TAB		NO	1 7 00	Aitei Weai	_
1208	4242		PERITONEAL DIALYSIS KIT	1	NO	sos	sos	Е
00			(PD KIT)	•		000	000	_
1209	4247		URETHRAL CATHETER	1	NO	sos	SOS	Е
1210	4263		ROLLER BANDAGE 5 CM	1	NO	sos	SOS	E
1211	4265	11718	INSULIN LISPRO BIPHASIC	300	UNIT	10 unit x od	After Meal	٧
			25/75 (25% INSULIN LISPRO					
			AND 75% INSULINE LISPRO					
			PROTAMINE SUSPENSION					
			100IU/ML,3ML) HUMALOG MIX					
			25 3ML CAPTRIDGE					
1212	4282	11665	DICYCLOMIN 10 MG TAB	1	MG	1 x od	SOS	V
1213	4301		SYP CEFUROXIME 125 MG	100	ML	1 tsp x od	After Meal	D
1214	4306		FOOT DROP SPLINT	1	NO	sos	After Meal	D
1215	4309		LEVETIRACETAM SR 500 MG	1	mg	1 x od	After Meal	E
4		4	TAB				46	_
1216		11119	GLYCERYL NITRATE 2.6 TAB	11	MG	1 x od	After Meal	E
1217	4318		SOFOSUVIR 400 MG +	1	MG	1 x bd	After Meal	E
4010	4000		DACLATASAVIR 60 MG TAB	4-		111		_
1218	4329		SILVER NITRATE +	15	gm	Local apply once a	LA	E
			CHLORHEXIDINE OINT			day		
1219	4331		(BURNHEAL)	1	NO		SOS	Е
1219	4338		SCALP VEIN SET SAVLON LIQUID BOTT OF 1	1000	ml	sos 1 tsp x od	After Meal	V
1220	4330		LTR	1000		i tsp x ou	Aitei Weai	v
1221	4342	12324	INJ HALOPERIDOL 5 MG	1	NO	sos	After Meal	Е
1221	7072	12024	(SERENACE)	•		303	Alter Mear	_
1222	4343		POVIDONE +	15	GM	Local apply once a	After Meal	Е
			METRONIDAZOLE OINT		J	day	7	_
1223	4344		RIFAMPICINE 225 MG+	1	MG	1 x od	After Meal	Е
			ISONIAZID 150MG+	-				_
			PYRAZINAMIDE 750 MG+					
			ETHAMBUTOL 400 MG					
			(FORCOX), TAB					
1224	4347		AKT 3 KIT(ISONIAZID(225MG)	mg	1 x od	After Meal		D
			+ RIFAMPICIN(150MG) +					
			ETHAMBUTOL(400MG) +					
			PYRAZINAMIDE(750MG)					
								_
1225	4356		AMOXYCILLIN 125 MG	1	mg	1 x od	After Meal	D
1222			DISPERSIBLE TAB					
1226	4361		KNEE CAP SMALL	1	NO	sos	SOS	D
1227	4368		SYRINGE DISPO PLASTIC 3 ML	1	NO	Local apply once a	After Meal	D
1228	4371		WITH NEEDLE MICROPORE 1 INCH PLASTER	1	NO	day	909	E
1228	43/1		WICKUPURE TINCH PLASTER	1	NU	sos	sos	
1229	4372		MICROPORE 2 INCH PLASTER	1	NO	sos	sos	D
1223	4312		INIONO ONL 2 INON FLAGIER		140	303	503	,
1230	4373		SILICON CATHETER 12 SIZE	1	NO	sos	sos	D
1231	4376		DISPOSABLE SHOE COVER	1	NO	sos	SOS	D
1232	4377		ALCOHOLIC HAND SANITIZER	500	NO	sos	SOS	V
			BOTT OF 500 ML					
1233		10626	AMITRYPTALLINE 25 MG TAB	1	NO	1Xod	After Meal	٧
1234	4383	12338	AMITRYPTALLINE 75 MG TAB	1	NO	1 x od	After Meal	E
1235	4384		CREPE BANDAGE 5 CM	1	NO	sos	SOS	E
1236	4388		MICROPORE 1/2 INCH	1	NO	sos	SOS	E
1237	4393	10543	LORAZEPAM 2 MG INJ	1	NO	once in a month	After Meal	E
1238	4394	10300	BETAMETHASONE 4 MG INJ	1	NO	once in a month	After Meal	Е
1239	4395	12518	POTASSIUM CHLORIDE 150	1	NO	once in a month	After Meal	٧
			MG INJ					
1240	4400	12487	BROMHEXINE 100 ML SYP	100	NO	1 tsp x od	After Meal	D
1241	4407	10831	INJ GEMCITABINE 1GM	11	NO	once in a month	After Meal	D
1242	4408	10832	INJ GEMCITABINE 200MG	1	NO	once in a month	After Meal	D
1243	4425	4000-	NORTRIPTYLINE 10 MG TAB	11	mg	1 x od	After Meal	V
1244	4404	12335	NORTRIPTYLINE 25 MG TAB	1	mg	1 x od	After Meal	E
1245	4434	40044	CRP KIT SPAN	11	mg	1 x od	After Meal	D
1246	4449	10311	PREGABALIN 75MG +	1	mg	1 x od	After Meal	E
			METHYLCOBALAMIN 1500MG					
			TAB					

1247									
MEASURING GLASS (* CANNING CLASS (* CANNING CLASS (*)	1247	4457			1	no	1 x bd	After Meal	E
1246				MEASURING GLASS (+					
1250	1248	4458		FLUOCINOLONE 0.1%W/V	15	gm		After Meal	E
AND WINGS	1249	4459		POVIDONE IODINE 10 % OINT	15	gm		After Meal	E
1283	1250	4466				NO	sos	sos	E
1253 4477 OFLOXACIN-GRINNIZOLE-HTR 15 gm Local apply once a After Meal D ACONAZOLE-CLOCABETASOL ACONAZOLE-CLOCABETASOLE ACONAZOLE ACONAZOLE ACONAZOLE ACONAZOLE-CLOCABETASOLE ACONAZOLE-CL	1251	4473		CHEST BINDER ALL SIZE	1	no	sos	SOS	D
ACOMAZOLE-CLOBETASOL	-					NO	1 x od		
1256 4498	1253	4477		ACONAZOLE+CLOBETASOL	15	gm		After Meal	D
1256 4499			11048	LENVATINIB 10 MG TAB					
1258 4516 11002 NIA METHOXY 1 NO sos SOS D									
1259									
1259	-								
POLYETHYLENE 75 MC POCKTENT BETA NO SoS SOS D			11002						
1260	1200	4017	11002	POLYETHYLENE 75 MG		110	303	555	_
1261 4522 13251 NI LEVOFLOX 100 ML 1 no sos After Meal D	1260	4518			1	NO	202	SOS	D
1262 4524 CRIESUPPORT BELT 1 no sos SOS D 1264 4553 11735 NJ NJ 1 NO sos SOS D 1264 4553 11735 NJ NJ 1 NO sos SOS D 1265 4554 12206 SYPCEFIXIME 50 MG 1 MG 1 x od After Meal D 1266 4554 12206 TOLPERSONE 50 MG TAB 1 MG 1 x od After Meal E 1267 4566 11172 TELMISARTAN 40 1 mg 1 x od After Meal E 1268 4571 10515 PERAMPANEL 4 MG 1 MG 1 x od After Meal E 1269 4572 12202 INH SALMERTOL 50 MG+ 1 puff 1 Puff x OD After Meal E 1270 4573 290006149 INH SALMERTOL 50 MG+ 1 puff 1 Puff x OD After Meal E 1271 4584 CERVICAL TRACTION KIT 1 NO sos SOS E 1272 4587 BIPHASIC ISOPHANE INSULIN SUSPENSION 1001U ML). 1273 4588 BIPHASIC ISOPHANE INSULIN SUSPENSION 1001U ML). 1274 4594 CERVICAL TRACTION KIT 1 NO sos SOS E 1275 4595 E DEPRAMPON 1001U ML). 1274 4594 LITHUM CARBONATE 1 mg 1 x od After Meal E 1275 4595 FACE SHELD 1 no sos SOS E 1276 4597 NON STERILE GLOVES SMALL 1 NO sos SOS E 1277 4598 KIT FOR ESTIMATION OF AKINE PROLONGE R 450 MG TAB 1 mg 1 x od After Meal E 1278 4599 KETODASTIK STRIP 50 NO once in a month SOS E 1278 4599 KETODASTIK STRIP 50 NO once in a month SOS E 1278 4599 HARCE STRIMATION OF AKINE BOO MG TAB 1 mg 1 x od After Meal E 1278 4599 KETODASTIK STRIP 50 NO once in a month SOS SOS E 1279 4602 10647 CEFUROXINE BOO MG TAB 1 mg 1 x od After Meal E 1280 4611 12525 INJ SODIUM BICARBONATE 1 mg 1 x od After Meal E 1281 4614 4620 NON STERILE GLOVES SMALL 1 no sos SOS D 1282 4616 12230 MEMANTINE BOO MG TAB 1 mg 1 x od After Meal E 1283 4617 12233 MEMANTINE BOO MG TAB 1 mg 1 x od After Meal E 1284 4624 NON STERILE GLOVES KL 1 no sos			13251						
1264 4553 11735									
1264 4553			120029						
1265									
1266 4554 12206 SYP CEFIXIME 50 MG									
1267	1265	4554	12206		1	MG	1 x od	After Meal	D
1268 4571 10515 PERMANEL A MG 1 MG 1 x od After Meal E	1266	4561		TOLPERSONE 50 MG TAB	1	MG	1 x od	After Meal	E
1269 4572 12202 INIS SALMETROL SO MCG+ 1 puff 1 puff 1 Puff x OD After Meal E ELUTICASONE 125 MCG 1 mg				MG+AMLODIPINE 10 MG TAB		_	1 x od		
1270				(FYCOMPA)TAB					
1271 4584 CERVICAL TRACTION KIT 1 NO SoS SOS E				FLUTICASONE 125 MCG	-	•			
1272			290006149	IPRATROPIUM 40 MCG					
1273 4588 BIPHASIC ISOPHANI ISOULIN SUSPENSION 100IU/ ML) MINTADR 16, 20M CADT MIN									
1273	12/2	4587		50 (HUMAN INSULIN 50% AS SOLUBLE INSULINE + 50 % ISOPHAN INSULIN SUSPENSION 100IU/ ML)	300	unit	10 unit x od	After Meal	E
1274	1273	4588		BIPHASIC ISOPHANE INSULIN 30 (HUMAN INSULIN 30% AS SOLUBLE INSULINE + 70 % ISOPHAN INSULIN SUSPENSION 100IU, 3 ML)	300	unit	10 unit x od	After Meal	E
1276	1274	4594		LITHIUM CARBONATE	1	mg	1 x od	After Meal	E
1277							sos		
ALKALINE PHOSPHATE					-				
1279				ALKALINE PHOSPHATE					
1280									
1281									
1282			12525	7.5%					
1283			49220	PARACETAMOL 125 MG TAB					_
1284	-								V
MEDIUM 1285 4621 NON STERILE GLOVES LARGE 1 no sos SOS D			12333						
1286 4622 NON STERILE GLOVES XL 1 no sos SOS D				MEDIUM					D.
1287 4624 ARE PAD (HOLISTER PAD) 1 NO once in a month SOS D									
1288 4625 BOX DENTURE 1 NO once in a month SOS D									
1289									
DIACERINE 50 MG + MSM 200 MG TAB									
1290 4635 SURGICAL BLADE 1 NO sos After Meal V 1291 4636 INJ PHENYTOIN SODIUM 1 NO 1 x od After Meal V 1292 4641 CABOZANTINIB 20 MG TAB 1 MG 1 x od After Meal E	.233	-1020		DIACERINE 50 MG + MSM 200		mg .	1 X 00	Autor Inical	
1291 4636 INJ PHENYTOIN SODIUM 1 NO 1 x od After Meal V 1292 4641 CABOZANTINIB 20 MG TAB 1 MG 1 x od After Meal E	1290	4635			1	NO	sos	After Meal	٧
1293 4648 PULSE OXYMETER 1 NO once in a month After Meal V									
	1293	4648		PULSE OXYMETER	1	NO	once in a month	After Meal	V

		•	1		1	1		
1294	4655		CAPILLARY TUBE	50	NO	once in a month	LA	V
1295	4661	11694	PANTOPRAZOLE 40 MG +	1	MG	1 x od	Before Meal	E
			DOMPERIDONE SR 30 MG CAP					
1296	4664		ACECLOFENAC 100 +	1	MG	1 x od	After Meal	E
			PARACETAMOL 325 +					
			CHLOROXAZONE 250 TAB					
			(HIFENAC MR)					
1297	4671		MIRTAZAPINE 10 MG TAB	1	mg	1 x bd	After Meal	E
1298	4675		NICERGOLINE 30 MG TAB	1	mg	1 x od	After Meal	E
1299		10597	INJ OCTREOTIDE LAR 30 MG	1	NO	1 x od	After Meal	E
1300	4684	11037	AFATINIB 30 MG TAB	1	MG	1 x bd	After Meal	E
1301	4686		INJ HYLAN POLYMER A AND B	1	NO	1 x od	After Meal	E
			GF 20 (SYNVISC)					
1302	4700	20001	INJ ANTI SNAKE VENOM 10ML	1	NO	once in a month	After Meal	V
1303	4701		CANNULA IV FIXATOR	1	no	sos	After Meal	Е
1304	4722	12123	EAR DROP	100	ml	1 tsp x od	After Meal	E
			CHLORAMPHENICOL 5% W/V					
			CLOTRIMAZOLE 1% W/V					
			BETAMETHASONE 0.25% W/V					
			LIGNOCAINE HCL 2% W/V IN					
			BOTTLE OF 5 MI					
1305	4737	11070	ETHAMSYLATE INJ	1	NO	once in a month	After Meal	E
1306	4740	11766	HUMAN INSULIN ANALOGUE	300	UNIT	10 unit x od	After Meal	E
			RAPID ACTING INJ 100 IU/ML					
			(RECOMBINANT DNA ORIGIN)					
			3 ML PES					
1307	4743		SYP CHLORPHENIRAMINE	60	ML	1 tsp x od	After Meal	Е
			MALEATE 1 MG +					_
			PARACETAMOL 125MG +					
			PHENYLEPHRINE 2.5MG					
1308	4755	10784	INJ FULVESTRANT 250 MG	1	MG	1 x od	After Meal	Е
.000	4,00	10704	/5ML	•		1 7 0 0	Attor mour	_
1309	4757	10327	BILASTINE 20 MG	1	MG	1 x od	after dinner	٧
1003	4707	10027	DISPERSIBLETAB	•	1110	1 7 00	arter arriver	•
1310	4759	11331	ACITRETIN 10 MG TAB	1	MG	1 x od	After Meal	
1311	4762	11331	SUMATRIPTAN 85 MG +	1	MG	1 x od	After Meal	V
1311	4702		NAPROXEN 500 MG TAB		WIG	1 7 00	Aitei Weai	•
1312	4779	11149	INJ METOPROLOL 1 MG/ML	1	NO	1 x od	After breakfast	
1312	7113						Aitei bieakiast	
	4785			1			SOS	
1313	4785 4786	270147	CAPD FLUID 7.5 % 2 LTR	1	NO	sos	SOS SOS	
1313 1314	4786		CAPD FLUID 7.5 % 2 LTR CAPD FLUID 2.5 % 5 LTR	1	NO NO	sos sos	SOS	D
1313		270147	CAPD FLUID 7.5 % 2 LTR CAPD FLUID 2.5 % 5 LTR DICLOFENAC GEL OF 10 GM		NO	sos sos Local apply once a		D
1313 1314	4786	270147	CAPD FLUID 7.5 % 2 LTR CAPD FLUID 2.5 % 5 LTR DICLOFENAC GEL OF 10 GM (VOVRAN)	1	NO NO GM	sos sos Local apply once a day	SOS LA	D
1313 1314 1315 1316	4786 4789 4795	270147	CAPD FLUID 7.5 % 2 LTR CAPD FLUID 2.5 % 5 LTR DICLOFENAC GEL OF 10 GM (VOVRAN) IV SET	1 10	NO NO GM	sos sos Local apply once a day sos	SOS LA SOS	
1313 1314 1315	4786 4789	270147	CAPD FLUID 7.5 % 2 LTR CAPD FLUID 2.5 % 5 LTR DICLOFENAC GEL OF 10 GM (VOVRAN) IV SET N95 MASK	1 10	NO NO GM	sos sos Local apply once a day sos sos	SOS LA SOS SOS	V
1313 1314 1315 1316 1317 1318	4786 4789 4795 4800 4818	270147	CAPD FLUID 7.5 % 2 LTR CAPD FLUID 2.5 % 5 LTR DICLOFENAC GEL OF 10 GM (VOVRAN) IV SET N95 MASK NELATON CATHETER 12 FR	1 10 1 1 1	NO NO GM NO no	sos sos Local apply once a day sos sos sos	SOS LA SOS SOS SOS	V
1313 1314 1315 1316 1317	4786 4789 4795 4800	270147	CAPD FLUID 7.5 % 2 LTR CAPD FLUID 2.5 % 5 LTR DICLOFENAC GEL OF 10 GM (VOVRAN) IV SET N95 MASK NELATON CATHETER 12 FR NORMAL SALINE FLUID	1 10 1	NO NO GM NO no	sos sos Local apply once a day sos sos	SOS LA SOS SOS	V V
1313 1314 1315 1316 1317 1318	4786 4789 4795 4800 4818	270147	CAPD FLUID 7.5 % 2 LTR CAPD FLUID 2.5 % 5 LTR DICLOFENAC GEL OF 10 GM (VOVRAN) IV SET N95 MASK NELATON CATHETER 12 FR NORMAL SALINE FLUID (SODIUM CHLORIDE 0.9 %- 500	1 10 1 1 1	NO NO GM NO no	sos sos Local apply once a day sos sos sos	SOS LA SOS SOS SOS	V V
1313 1314 1315 1316 1317 1318 1319	4786 4789 4795 4800 4818 4820	270147 270154	CAPD FLUID 7.5 % 2 LTR CAPD FLUID 2.5 % 5 LTR DICLOFENAC GEL OF 10 GM (VOVRAN) IV SET N95 MASK NELATON CATHETER 12 FR NORMAL SALINE FLUID (SODIUM CHLORIDE 0.9 %- 500 ML)	1 10 1 1 1 500	NO NO GM NO no NO ML	sos sos Local apply once a day sos sos sos sos	SOS LA SOS SOS SOS SOS	V V
1313 1314 1315 1316 1317 1318	4786 4789 4795 4800 4818	270147	CAPD FLUID 7.5 % 2 LTR CAPD FLUID 2.5 % 5 LTR DICLOFENAC GEL OF 10 GM (VOVRAN) IV SET N95 MASK NELATON CATHETER 12 FR NORMAL SALINE FLUID (SODIUM CHLORIDE 0.9 %- 500 ML) INJ ETOPHYLLNE 84.7 +	1 10 1 1 1	NO NO GM NO no	sos sos Local apply once a day sos sos sos	SOS LA SOS SOS SOS	V V
1313 1314 1315 1316 1317 1318 1319	4786 4789 4795 4800 4818 4820	270147 270154	CAPD FLUID 7.5 % 2 LTR CAPD FLUID 2.5 % 5 LTR DICLOFENAC GEL OF 10 GM (VOVRAN) IV SET N95 MASK NELATON CATHETER 12 FR NORMAL SALINE FLUID (SODIUM CHLORIDE 0.9 %- 500 ML) INJ ETOPHYLLNE 84.7 + THEOPHYLLINE 25.3 /ML	1 10 1 1 1 500	NO NO GM NO no NO ML	sos sos Local apply once a day sos sos sos sos sos	SOS LA SOS SOS SOS SOS After Meal	V V
1313 1314 1315 1316 1317 1318 1319 1320	4786 4789 4795 4800 4818 4820 4829	270147 270154	CAPD FLUID 7.5 % 2 LTR CAPD FLUID 2.5 % 5 LTR DICLOFENAC GEL OF 10 GM (VOVRAN) IV SET N95 MASK NELATON CATHETER 12 FR NORMAL SALINE FLUID (SODIUM CHLORIDE 0.9 %- 500 ML) INJ ETOPHYLLINE 84.7 + THEOPHYLLINE 25.3 /ML COLOSTOMY WAFER 45 MM	1 10 1 1 1 500	NO NO GM NO no NO ML	sos sos Local apply once a day sos sos sos sos sos sos	SOS LA SOS SOS SOS SOS After Meal SOS	V V V
1313 1314 1315 1316 1317 1318 1319	4786 4789 4795 4800 4818 4820	270147 270154	CAPD FLUID 7.5 % 2 LTR CAPD FLUID 2.5 % 5 LTR DICLOFENAC GEL OF 10 GM (VOVRAN) IV SET N95 MASK NELATON CATHETR 12 FR NORMAL SALINE FLUID (SODIUM CHLORIDE 0.9 %- 500 ML) INJ ETOPHYLLNE 84.7 + THEOPHYLLINE 25.3 /ML COLOSTOMY WAFER 45 MM MALE EXTERNAL CONDOM	1 10 1 1 1 500	NO NO GM NO no NO ML	sos sos Local apply once a day sos sos sos sos sos	SOS LA SOS SOS SOS SOS After Meal	V V
1313 1314 1315 1316 1317 1318 1319 1320 1321 1322	4786 4789 4795 4800 4818 4820 4829 4830 4831	270147 270154	CAPD FLUID 7.5 % 2 LTR CAPD FLUID 2.5 % 5 LTR DICLOFENAC GEL OF 10 GM (VOVRAN) IV SET N95 MASK NELATON CATHETER 12 FR NORMAL SALINE FLUID (SODIUM CHLORIDE 0.9 %- 500 ML) INJ ETOPHYLLNE 84.7 + THEOPHYLLINE 25.3 /ML COLOSTOMY WAFER 45 MM MALE EXTERNAL CONDOM CATHETER SIZE L	1 10 1 1 1 500 1 1	NO NO GM NO no NO NO ML NO NO	sos sos Local apply once a day sos sos sos sos sos sos sos	\$0\$ LA \$0\$ \$0\$ \$0\$ \$0\$ \$0\$ \$0\$ After Meal \$0\$ \$0\$	V V V
1313 1314 1315 1316 1317 1318 1319 1320	4786 4789 4795 4800 4818 4820 4829	270147 270154	CAPD FLUID 7.5 % 2 LTR CAPD FLUID 2.5 % 5 LTR DICLOFENAC GEL OF 10 GM (VOVRAN) IV SET N95 MASK NELATON CATHETER 12 FR NORMAL SALINE FLUID (SODIUM CHLORIDE 0.9 %- 500 ML) INJ ETOPHYLLINE 84.7 + THEOPHYLLINE 25.3 /ML COLOSTOMY WAFER 45 MM MALE EXTERNAL CONDOM CATHETER SIZE L MALE EXTERNAL CONDOM	1 10 1 1 1 500	NO NO GM NO no NO ML	sos sos Local apply once a day sos sos sos sos sos sos	SOS LA SOS SOS SOS SOS After Meal SOS	V V V
1313 1314 1315 1316 1317 1318 1319 1320 1321 1322 1323	4786 4789 4795 4800 4818 4820 4829 4830 4831	270147 270154	CAPD FLUID 7.5 % 2 LTR CAPD FLUID 2.5 % 5 LTR DICLOFENAC GEL OF 10 GM (VOVRAN) IV SET N95 MASK NELATON CATHETER 12 FR NORMAL SALINE FLUID (SODIUM CHLORIDE 0.9 %- 500 ML) INJ ETOPHYLLNE 84.7 + THEOPHYLLINE 25.3 /ML COLOSTOMY WAFER 45 MM MALE EXTERNAL CONDOM CATHETER SIZE L MALE EXTERNAL CONDOM CATHETER SIZE S	1 10 1 1 1 500 1 1 1	NO NO O NO	sos sos Local apply once a day sos sos sos sos sos sos sos sos	SOS LA SOS SOS SOS SOS After Meal SOS SOS SOS	V V V D D
1313 1314 1315 1316 1317 1318 1319 1320 1321 1322 1323	4786 4789 4795 4800 4818 4820 4829 4830 4831 4833	270147 270154	CAPD FLUID 7.5 % 2 LTR CAPD FLUID 2.5 % 5 LTR DICLOFENAC GEL OF 10 GM (VOVRAN) IV SET N95 MASK NELATON CATHETER 12 FR NORMAL SALINE FLUID (SODIUM CHLORIDE 0.9 %- 500 ML) INJ ETOPHYLLNE 84.7 + THEOPHYLLINE 25.3 /ML COLOSTOMY WAFER 45 MM MALE EXTERNAL CONDOM CATHETER SIZE L MALE EXTERNAL CONDOM CATHETER SIZE S UROSTOMY BAG 50 MM	1 10 1 1 1 500 1 1 1 1	NO NO O NO	sos sos Local apply once a day sos sos sos sos sos sos sos sos sos so	SOS LA SOS SOS SOS SOS After Meal SOS SOS SOS SOS	V V V D D
1313 1314 1315 1316 1317 1318 1319 1320 1321 1322 1323 1324 1325	4786 4789 4795 4800 4818 4820 4829 4830 4831 4833 4834 4835	270147 270154	CAPD FLUID 7.5 % 2 LTR CAPD FLUID 2.5 % 5 LTR DICLOFENAC GEL OF 10 GM (VOVRAN) IV SET N95 MASK NELATON CATHETER 12 FR NORMAL SALINE FLUID (SODIUM CHLORIDE 0.9 %- 500 ML) INJ ETOPHYLLNE 84.7 + THEOPHYLLINE 25.3 /ML COLOSTOMY WAFER 45 MM MALE EXTERNAL CONDOM CATHETER SIZE L MALE EXTERNAL CONDOM CATHETER SIZE L UROSTOMY BAG 50 MM URI-COND MALE CATH 25 MM	1 10 1 1 1 500 1 1 1 1 1	NO NO O NO	sos sos Local apply once a day sos sos sos sos sos sos sos sos sos so	\$0\$ LA \$0\$ \$0\$ \$0\$ \$0\$ \$0\$ \$0\$ \$0\$ After Meal \$0\$ \$0\$ \$0\$ \$0\$ \$0\$ \$0\$	V V V D D E E
1313 1314 1315 1316 1317 1318 1319 1320 1321 1322 1323 1324 1325 1326	4786 4789 4795 4800 4818 4820 4829 4830 4831 4833 4834 4835 4837	270147 270154	CAPD FLUID 7.5 % 2 LTR CAPD FLUID 2.5 % 5 LTR DICLOFENAC GEL OF 10 GM (VOVRAN) IV SET N95 MASK NELATON CATHETER 12 FR NORMAL SALINE FLUID (SODIUM CHLORIDE 0.9 %- 500 ML) INJ ETOPHYLLINE 84.7 + THEOPHYLLINE 25.3 /ML COLOSTOMY WAFER 45 MM MALE EXTERNAL CONDOM CATHETER SIZE L MALE EXTERNAL CONDOM CATHETER SIZE S UROSTOMY BAG 50 MM URI-COND MALE CATH 25 MM	1 10 1 1 1 500 1 1 1 1 1 1	NO N	sos sos Local apply once a day sos sos sos sos sos sos sos sos sos so	\$0\$ LA \$0\$ \$0\$ \$0\$ \$0\$ \$0\$ \$0\$ \$0\$ After Meal \$0\$ \$0\$ \$0\$ \$0\$ \$0\$ \$0\$ \$0\$ \$0\$	V V V D D E E E E E E E
1313 1314 1315 1316 1317 1318 1319 1320 1321 1322 1323 1324 1325 1326 1327	4786 4789 4795 4800 4818 4820 4829 4830 4831 4833 4834 4835 4837 4838	270147 270154	CAPD FLUID 7.5 % 2 LTR CAPD FLUID 2.5 % 5 LTR DICLOFENAC GEL OF 10 GM (VOVRAN) IV SET N95 MASK NELATON CATHETER 12 FR NORMAL SALINE FLUID (SODIUM CHLORIDE 0.9 %- 500 ML) INJ ETOPHYLLNE 84.7 + THEOPHYLLINE 25.3 /ML COLOSTOMY WAFER 45 MM MALE EXTERNAL CONDOM CATHETER SIZE L MALE EXTERNAL CONDOM CATHETER SIZE S UROSTOMY BAG 50 MM URI-COND MALE CATH 25 MM HCV TEST KIT RYLES TUBE SIZE 16	1 10 1 1 1 500 1 1 1 1 1 1	NO N	sos sos Local apply once a day sos sos sos sos sos sos sos sos sos so	SOS LA SOS SOS SOS SOS After Meal SOS SOS SOS SOS SOS SOS SOS SOS SOS S	V V V D D E E E E
1313 1314 1315 1316 1317 1318 1319 1320 1321 1322 1323 1324 1325 1326 1327 1328	4786 4789 4795 4800 4818 4820 4829 4830 4831 4833 4834 4835 4837 4838 4839	270147 270154	CAPD FLUID 7.5 % 2 LTR CAPD FLUID 2.5 % 5 LTR DICLOFENAC GEL OF 10 GM (VOVRAN) IV SET N95 MASK NELATON CATHETER 12 FR NORMAL SALINE FLUID (SODIUM CHLORIDE 0.9 %- 500 ML) INJ ETOPHYLLNE 84.7 + THEOPHYLLINE 25.3 /ML COLOSTOMY WAFER 45 MM MALE EXTERNAL CONDOM CATHETER SIZE L MALE EXTERNAL CONDOM CATHETER SIZE S UROSTOMY BAG 50 MM URI-COND MALE CATH 25 MM HCV TEST KIT RYLES TUBE SIZE 16 RYLES TUBE SIZE 18	1 10 1 1 1 500 1 1 1 1 1 1 1 1	NO N	SOS SOS	SOS LA SOS SOS SOS SOS After Meal SOS SOS SOS SOS SOS SOS SOS SOS SOS SO	V V V D D E E E E E
1313 1314 1315 1316 1317 1318 1319 1320 1321 1322 1323 1324 1325 1326 1327	4786 4789 4795 4800 4818 4820 4829 4830 4831 4833 4834 4835 4837 4838	270147 270154	CAPD FLUID 7.5 % 2 LTR CAPD FLUID 2.5 % 5 LTR DICLOFENAC GEL OF 10 GM (VOVRAN) IV SET N95 MASK NELATON CATHETER 12 FR NORMAL SALINE FLUID (SODIUM CHLORIDE 0.9 %- 500 ML) INJ ETOPHYLLNE 84.7 + THEOPHYLLINE 25.3 /ML COLOSTOMY WAFER 45 MM MALE EXTERNAL CONDOM CATHETER SIZE L MALE EXTERNAL CONDOM CATHETER SIZE S UROSTOMY BAG 50 MM URI-COND MALE CATH 25 MM HCV TEST KIT RYLES TUBE SIZE 16	1 10 1 1 1 500 1 1 1 1 1 1	NO N	sos sos Local apply once a day sos sos sos sos sos sos sos sos sos so	SOS LA SOS SOS SOS SOS After Meal SOS SOS SOS SOS SOS SOS SOS SOS SOS S	V V V D D E E E E
1313 1314 1315 1316 1317 1318 1319 1320 1321 1322 1323 1324 1325 1326 1327 1328 1329	4786 4789 4795 4800 4818 4820 4829 4830 4831 4833 4834 4835 4837 4838 4839 4844	270147 270154	CAPD FLUID 7.5 % 2 LTR CAPD FLUID 2.5 % 5 LTR DICLOFENAC GEL OF 10 GM (VOVRAN) IV SET N95 MASK NELATON CATHETER 12 FR NORMAL SALINE FLUID (SODIUM CHLORIDE 0.9 %- 500 ML) INJ ETOPHYLLINE 84.7 + THEOPHYLLINE 25.3 /ML COLOSTOMY WAFER 45 MM MALE EXTERNAL CONDOM CATHETER SIZE L MALE EXTERNAL CONDOM CATHETER SIZE S UROSTOMY BAG 50 MM URI-COND MALE CATH 25 MM HCV TEST KIT RYLES TUBE SIZE 18 TOLPERISONE SR 150 MG TAB	1 10 1 1 1 500 1 1 1 1 1 1 1 1 1 1 1	NO N	sos sos sos Local apply once a day sos sos sos sos sos sos sos sos sos so	\$0\$ LA \$0\$ \$0\$ \$0\$ \$0\$ \$0\$ \$0\$ \$0\$ After Meal \$0\$ \$0\$ \$0\$ \$0\$ \$0\$ \$0\$ \$0\$ \$0\$ \$0\$ \$	V V V D D E E E E V V D D
1313 1314 1315 1316 1317 1318 1319 1320 1321 1322 1323 1324 1325 1326 1327 1328 1329 1330	4786 4789 4795 4800 4818 4820 4839 4831 4833 4834 4835 4837 4838 4839 4844	270147 270154	CAPD FLUID 7.5 % 2 LTR CAPD FLUID 2.5 % 5 LTR DICLOFENAC GEL OF 10 GM (VOVRAN) IV SET N95 MASK NELATON CATHETER 12 FR NORMAL SALINE FLUID (SODIUM CHLORIDE 0.9 %- 500 ML) INJ ETOPHYLLINE 84.7 + THEOPHYLLINE 25.3 /ML COLOSTOMY WAFER 45 MM MALE EXTERNAL CONDOM CATHETER SIZE L MALE EXTERNAL CONDOM CATHETER SIZE S UROSTOMY BAG 50 MM URI-COND MALE CATH 25 MM HCV TEST KIT RYLES TUBE SIZE 16 RYLES TUBE SIZE 18 TOLPERISONE SR 150 MG TAB	1 10 1 1 1 500 1 1 1 1 1 1 1 1 1 1	NO N	sos sos day sos sos Local apply once a day sos sos sos sos sos sos sos sos sos so	\$0\$ LA \$0\$ \$0\$ \$0\$ \$0\$ \$0\$ \$0\$ \$0\$ \$0\$ \$0\$ \$	V V V D D E E E E V V V D D D D D
1313 1314 1315 1316 1317 1318 1319 1320 1321 1322 1323 1324 1325 1326 1327 1328 1329 1330 1331	4786 4789 4795 4800 4818 4820 4829 4830 4831 4833 4834 4835 4837 4838 4839 4844	270147 270154	CAPD FLUID 7.5 % 2 LTR CAPD FLUID 2.5 % 5 LTR DICLOFENAC GEL OF 10 GM (VOVRAN) IV SET N95 MASK NELATON CATHETER 12 FR NORMAL SALINE FLUID (SODIUM CHLORIDE 0.9 %- 500 ML) INJ ETOPHYLLNE 84.7 + THEOPHYLLINE 25.3 /ML COLOSTOMY WAFER 45 MM MALE EXTERNAL CONDOM CATHETER SIZE L MALE EXTERNAL CONDOM CATHETER SIZE S UROSTOMY BAG 50 MM URI-COND MALE CATH 25 MM HCV TEST KIT RYLES TUBE SIZE 18 TOLPERISONE SR 150 MG TAB BLOOD TRANSFUSION SET NORMAL SALINE 1000 ML	1 10 1 1 1 500 1 1 1 1 1 1 1 1 1 1 1 1 1	NO N	sos sos sos Local apply once a day sos sos sos sos sos sos sos sos sos so	SOS	V V V V D D D D D D D D D D D D D D D D
1313 1314 1315 1316 1317 1318 1319 1320 1321 1322 1323 1324 1325 1326 1327 1328 1329 1330	4786 4789 4795 4800 4818 4820 4839 4831 4833 4834 4835 4837 4838 4839 4844	270147 270154	CAPD FLUID 7.5 % 2 LTR CAPD FLUID 2.5 % 5 LTR DICLOFENAC GEL OF 10 GM (VOVRAN) IV SET N95 MASK NELATON CATHETER 12 FR NORMAL SALINE FLUID (SODIUM CHLORIDE 0.9 %- 500 ML) INJ ETOPHYLLNE 84.7 + THEOPHYLLINE 25.3 /ML COLOSTOMY WAFER 45 MM MALE EXTERNAL CONDOM CATHETER SIZE L MALE EXTERNAL CONDOM CATHETER SIZE S UROSTOMY BAG 50 MM URI-COND MALE CATH 25 MM HCV TEST KIT RYLES TUBE SIZE 16 RYLES TUBE SIZE 18 TOLPERISONE SR 150 MG TAB BLOOD TRANSFUSION SET NORMAL SALINE 1000 ML SYP PARACETAMOL 162 MG +	1 10 1 1 1 500 1 1 1 1 1 1 1 1 1 1	NO N	sos sos day sos sos Local apply once a day sos sos sos sos sos sos sos sos sos so	\$0\$ LA \$0\$ \$0\$ \$0\$ \$0\$ \$0\$ \$0\$ \$0\$ \$0\$ \$0\$ \$	V V V D D E E E E V V V D D D D D
1313 1314 1315 1316 1317 1318 1319 1320 1321 1322 1323 1324 1325 1326 1327 1328 1329 1330 1331 1332	4786 4789 4795 4800 4818 4820 4829 4830 4831 4833 4834 4835 4837 4838 4839 4844 4847 4849 4850	270147 270154	CAPD FLUID 7.5 % 2 LTR CAPD FLUID 2.5 % 5 LTR DICLOFENAC GEL OF 10 GM (VOVRAN) IV SET N95 MASK NELATON CATHETER 12 FR NORMAL SALINE FLUID (SODIUM CHLORIDE 0.9 %- 500 ML) INJ ETOPHYLLNE 84.7 + THEOPHYLLINE 25.3 /ML COLOSTOMY WAFER 45 MM MALE EXTERNAL CONDOM CATHETER SIZE L MALE EXTERNAL CONDOM CATHETER SIZE S UROSTOMY BAG 50 MM URI-COND MALE CATH 25 MM HCV TEST KIT RYLES TUBE SIZE 16 RYLES TUBE SIZE 18 TOLPERISONE SR 150 MG TAB BLOOD TRANSFUSION SET NORMAL SALINE 1000 ML SYP PARACETAMOL 162 MG + IBUPROFEN 100 MG 60 ML	1 10 1 1 1 500 1 1 1 1 1 1 1 1 1 1 1 1 1	NO N	SOS SOS	\$0\$ LA \$0\$ \$0\$ \$0\$ \$0\$ \$0\$ \$0\$ \$0\$ \$0\$ After Meal \$0\$ \$0\$ \$0\$ \$0\$ \$0\$ \$0\$ \$0\$ \$0\$ \$0\$ \$	V V V D D E E E V V D D D D D D D D D D
1313 1314 1315 1316 1317 1318 1319 1320 1321 1322 1323 1324 1325 1326 1327 1328 1329 1330 1331 1332	4786 4789 4789 4800 4818 4820 4829 4830 4831 4833 4834 4835 4837 4838 4839 4844 4847 4849 4850 4850	12451 12207	CAPD FLUID 7.5 % 2 LTR CAPD FLUID 2.5 % 5 LTR DICLOFENAC GEL OF 10 GM (VOVRAN) IV SET N95 MASK NELATON CATHETER 12 FR NORMAL SALINE FLUID (SODIUM CHLORIDE 0.9 %- 500 ML) INJ ETOPHYLLINE 24.7 + THEOPHYLLINE 25.3 /ML COLOSTOMY WAFER 45 MM MALE EXTERNAL CONDOM CATHETER SIZE L MALE EXTERNAL CONDOM CATHETER SIZE S UROSTOMY BAG 50 MM URI-COND MALE CATH 25 MM HCV TEST KIT RYLES TUBE SIZE 16 RYLES TUBE SIZE 18 TOLPERISONE SR 150 MG TAB BLOOD TRANSFUSION SET NORMAL SALINE 1000 ML SYP PARACETAMOL 162 MG + IBUPROFEN 100 MG 60 ML SYP CEFACLOR 125 MG/5 ML	1 10 1 1 1 500 1 1 1 1 1 1 1 1 1 1 1 1 1	NO N	SOS SOS	SOS	V V V D D D D D D D D D D D D D D D D D
1313 1314 1315 1316 1317 1318 1319 1320 1321 1322 1323 1324 1325 1326 1327 1328 1329 1331 1332 1331	4786 4789 4789 4795 4800 4818 4820 4829 4830 4831 4833 4834 4835 4837 4838 4839 4844 4847 4849 4850 4851 4877	12451 12207 10886	CAPD FLUID 7.5 % 2 LTR CAPD FLUID 2.5 % 5 LTR DICLOFENAC GEL OF 10 GM (VOVRAN) IV SET N95 MASK NELATON CATHETER 12 FR NORMAL SALINE FLUID (SODIUM CHLORIDE 0.9 %- 500 ML) INJ ETOPHYLLINE 84.7 + THEOPHYLLINE 25.3 /ML COLOSTOMY WAFER 45 MM MALE EXTERNAL CONDOM CATHETER SIZE L MALE EXTERNAL CONDOM CATHETER SIZE S UROSTOMY BAG 50 MM URI-COND MALE CATH 25 MM HCV TEST KIT RYLES TUBE SIZE 16 RYLES TUBE SIZE 16 RYLES TUBE SIZE 18 TOLPERISONE SR 150 MG TAB BLOOD TRANSFUSION SET NORMAL SALINE 1000 ML SYP PARACETAMOL 162 MG + IBUPROFEN 100 MG 60 ML SYP CEFACLOR 125 MG/5 ML INJ ZOLEDRONIC ACID 5 MG	1 10 1 1 1 500 1 1 1 1 1 1 1 1 1 1 1 1 1	NO N	SOS SOS	SOS	V V V D D D D E E E V V D D D D D D D D
1313 1314 1315 1316 1317 1318 1319 1320 1321 1322 1323 1324 1325 1326 1327 1328 1329 1330 1331 1332 1332	4786 4789 4789 4795 4800 4818 4820 4829 4830 4831 4833 4834 4835 4837 4838 4839 4844 4847 4849 4850 4851 4877 4883	12451 12207	CAPD FLUID 7.5 % 2 LTR CAPD FLUID 2.5 % 5 LTR DICLOFENAC GEL OF 10 GM (VOVRAN) IV SET N95 MASK NELATON CATHETER 12 FR NORMAL SALINE FLUID (SODIUM CHLORIDE 0.9 %- 500 ML) INJ ETOPHYLLNE 84.7 + THEOPHYLLINE 25.3 /ML COLOSTOMY WAFER 45 MM MALE EXTERNAL CONDOM CATHETER SIZE L MALE EXTERNAL CONDOM CATHETER SIZE S UROSTOMY BAG 50 MM URI-COND MALE CATH 25 MM HCV TEST KIT RYLES TUBE SIZE 16 RYLES TUBE SIZE 18 TOLPERISONE SR 150 MG TAB BLOOD TRANSFUSION SET NORMAL SALINE 1000 ML SYP PARACETAMOL 162 MG + IBUPROFEN 100 MG 60 ML SYP CEFACLOR 125 MG/5 ML INJ ZOLEDRONIC ACID 5 MG DOXOPHYLLINE 400 MG TAB	1 10 1 1 1 500 1 1 1 1 1 1 1 1 1 1 1 1 1	NO N	SOS SOS	SOS LA SOS SOS SOS SOS SOS After Meal SOS SOS SOS SOS SOS SOS SOS SOS SOS After Meal	V V V D D D E E E E V V D D D D D D D D
1313 1314 1315 1316 1317 1318 1319 1320 1321 1322 1323 1324 1325 1326 1327 1328 1329 1331 1332 1331	4786 4789 4789 4795 4800 4818 4820 4829 4830 4831 4833 4834 4835 4837 4838 4839 4844 4847 4849 4850 4851 4877	12451 12207 10886	CAPD FLUID 7.5 % 2 LTR CAPD FLUID 2.5 % 5 LTR DICLOFENAC GEL OF 10 GM (VOVRAN) IV SET N95 MASK NELATON CATHETER 12 FR NORMAL SALINE FLUID (SODIUM CHLORIDE 0.9 %- 500 ML) INJ ETOPHYLLINE 84.7 + THEOPHYLLINE 25.3 /ML COLOSTOMY WAFER 45 MM MALE EXTERNAL CONDOM CATHETER SIZE L MALE EXTERNAL CONDOM CATHETER SIZE L MALE EXTERNAL CONDOM CATHETER SIZE S UROSTOMY BAG 50 MM URI-COND MALE CATH 25 MM HCV TEST KIT RYLES TUBE SIZE 16 RYLES TUBE SIZE 18 TOLPERISONE SR 150 MG TAB BLOOD TRANSFUSION SET NORMAL SALINE 1000 ML SYP PARACETAMOL 162 MG + IBUPROFEN 100 MG 60 ML SYP CEFACLOR 125 MG/5 ML INJ ZOLEDRONIC ACID 5 MG DOXOPHYLLINE 400 MG TAB	1 10 1 1 1 500 1 1 1 1 1 1 1 1 1 1 1 1 1	NO N	SOS SOS	SOS	V V V D D D D E E E E V V D D D D D D D
1313 1314 1315 1316 1317 1318 1319 1320 1321 1322 1323 1324 1325 1326 1327 1328 1329 1330 1331 1332 1333 1334 1335	4786 4789 4789 4795 4800 4818 4820 4829 4830 4831 4833 4834 4835 4837 4838 4839 4844 4847 4849 4850 4851 4877 4883	12451 12207 10886	CAPD FLUID 7.5 % 2 LTR CAPD FLUID 2.5 % 5 LTR DICLOFENAC GEL OF 10 GM (VOVRAN) IV SET N95 MASK NELATON CATHETER 12 FR NORMAL SALINE FLUID (SODIUM CHLORIDE 0.9 %- 500 ML) INJ ETOPHYLLNE 84.7 + THEOPHYLLINE 25.3 /ML COLOSTOMY WAFER 45 MM MALE EXTERNAL CONDOM CATHETER SIZE L MALE EXTERNAL CONDOM CATHETER SIZE S UROSTOMY BAG 50 MM URI-COND MALE CATH 25 MM HCV TEST KIT RYLES TUBE SIZE 16 RYLES TUBE SIZE 18 TOLPERISONE SR 150 MG TAB BLOOD TRANSFUSION SET NORMAL SALINE 1000 ML SYP PARACETAMOL 162 MG + IBUPROFEN 100 MG 60 ML SYP CEFACLOR 125 MG/5 ML INJ ZOLEDRONIC ACID 5 MG DOXOPHYLLINE 400 MG TAB	1 10 1 1 1 500 1 1 1 1 1 1 1 1 1 1 1 1 1	NO N	SOS SOS	SOS	V V V D D D E E E E D D D D D D D D D D
1313 1314 1315 1316 1317 1318 1319 1320 1321 1322 1323 1324 1325 1326 1327 1328 1329 1330 1331 1332 1331 1332 1333 1334 1335 1336	4786 4789 4789 4795 4800 4818 4820 4829 4830 4831 4833 4834 4835 4837 4838 4839 4844 4847 4849 4850 4851 4877 4883 4895	12451 12207 10588	CAPD FLUID 7.5 % 2 LTR CAPD FLUID 2.5 % 5 LTR DICLOFENAC GEL OF 10 GM (VOVRAN) IV SET N95 MASK NELATON CATHETER 12 FR NORMAL SALINE FLUID (SODIUM CHLORIDE 0.9 %- 500 ML) INJ ETOPHYLLINE 84.7 + THEOPHYLLINE 25.3 /ML COLOSTOMY WAFER 45 MM MALE EXTERNAL CONDOM CATHETER SIZE L MALE EXTERNAL CONDOM CATHETER SIZE S UROSTOMY BAG 50 MM URI-COND MALE CATH 25 MM HCV TEST KIT RYLES TUBE SIZE 16 RYLES TUBE SIZE 18 TOLPERISONE SR 150 MG TAB BLOOD TRANSFUSION SET NORMAL SALINE 1000 ML SYP PARACETAMOL 162 MG + IBUPROFEN 100 MG 60 ML SYP CEFACLOR 125 MG/5 ML INJ ZOLEDRONIC ACID 5 MG DOXOPHYLLINE 400 MG TAB VACCUM BLOOD COLLECTION TUBE WITH GEL	1 10 1 1 1 500 1 1 1 1 1 1 1 1 1 1 1 1 1	NO N	SOS SOS	SOS LA SOS SOS SOS SOS SOS After Meal SOS SOS SOS SOS SOS SOS SOS After Meal Before Meal	V V V V D D D D E E E E V V D D D D D D
1313 1314 1315 1316 1317 1318 1319 1320 1321 1322 1323 1324 1325 1326 1327 1328 1329 1330 1331 1332 1333 1334 1335	4786 4789 4789 4795 4800 4818 4820 4829 4830 4831 4833 4834 4835 4837 4838 4839 4844 4847 4849 4850 4851 4877 4883	12451 12207 10886	CAPD FLUID 7.5 % 2 LTR CAPD FLUID 2.5 % 5 LTR DICLOFENAC GEL OF 10 GM (VOVRAN) IV SET N95 MASK NELATON CATHETER 12 FR NORMAL SALINE FLUID (SODIUM CHLORIDE 0.9 %- 500 ML) INJ ETOPHYLLINE 84.7 + THEOPHYLLINE 25.3 /ML COLOSTOMY WAFER 45 MM MALE EXTERNAL CONDOM CATHETER SIZE L MALE EXTERNAL CONDOM CATHETER SIZE S UROSTOMY BAG 50 MM URI-COND MALE CATH 25 MM HCV TEST KIT RYLES TUBE SIZE 16 RYLES TUBE SIZE 18 TOLPERISONE SR 150 MG TAB BLOOD TRANSFUSION SET NORMAL SALINE 1000 ML SYP PARACETAMOL 162 MG + IBUPROFEN 100 MG 60 ML SYP CEFACLOR 125 MG/5 ML INJ ZOLEDRONIC ACID 5 MG DOXOPHYLLINE 400 MG TAB VACCUM BLOOD COLLECTION TUBE WITH GEL	1 10 1 1 1 500 1 1 1 1 1 1 1 1 1 1 1 1 1	NO N	SOS SOS	SOS	V V V D D D E E E E V V D D D D D D D D
1313 1314 1315 1316 1317 1318 1319 1320 1321 1322 1323 1324 1325 1326 1327 1328 1329 1330 1331 1332 1333 1334 1335 1336	4786 4789 4795 4800 4818 4820 4829 4830 4831 4833 4834 4835 4837 4838 4839 4844 4847 4849 4850 4851 4877 4883 4895	12451 12207 10886 10588	CAPD FLUID 7.5 % 2 LTR CAPD FLUID 2.5 % 5 LTR DICLOFENAC GEL OF 10 GM (VOVRAN) IV SET N95 MASK NELATON CATHETER 12 FR NORMAL SALINE FLUID (SODIUM CHLORIDE 0.9 %- 500 ML) INJ ETOPHYLLINE 84.7 + THEOPHYLLINE 25.3 /ML COLOSTOMY WAFER 45 MM MALE EXTERNAL CONDOM CATHETER SIZE L MALE EXTERNAL CONDOM CATHETER SIZE L MALE EXTERNAL CONDOM CATHETER SIZE S UROSTOMY BAG 50 MM URI-COND MALE CATH 25 MM HCV TEST KIT RYLES TUBE SIZE 16 RYLES TUBE SIZE 18 TOLPERISONE SR 150 MG TAB BLOOD TRANSFUSION SET NORMAL SALINE 1000 ML SYP PARACETAMOL 162 MG + IBUPROFEN 100 MG 60 ML SYP CEFACLOR 125 MG/5 ML INJ ZOLEDRONIC ACID 5 MG DOXOPHYLLINE 400 MG TAB VACCUM BLOOD COLLECTION TUBE WITH GEL INJ PROGESTERONE 100 MG/ML	1 10 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	NO N	sos sos sos Local apply once a day sos sos sos sos sos sos sos sos sos so	SOS LA SOS LA SOS SOS SOS SOS SOS SOS SOS SOS SOS SO	V V V D D D E E E E V V D D D D D V E E E E
1313 1314 1315 1316 1317 1318 1319 1320 1321 1322 1323 1324 1325 1326 1327 1328 1329 1330 1331 1332 1333 1334 1335 1336 1337	4786 4789 4789 4795 4800 4818 4820 4829 4830 4831 4833 4834 4835 4837 4838 4839 4844 4847 4849 4850 4851 4877 4883 4895	12451 12451 12451 12451 13916	CAPD FLUID 7.5 % 2 LTR CAPD FLUID 2.5 % 5 LTR DICLOFENAC GEL OF 10 GM (VOVRAN) IV SET N95 MASK NELATON CATHETER 12 FR NORMAL SALINE FLUID (SODIUM CHLORIDE 0.9 %- 500 ML) INJ ETOPHYLLNE 84.7 + THEOPHYLLINE 25.3 /ML COLOSTOMY WAFER 45 MM MALE EXTERNAL CONDOM CATHETER SIZE L MALE EXTERNAL CONDOM CATHETER SIZE S UROSTOMY BAG 50 MM URI-COND MALE CATH 25 MM HCV TEST KIT RYLES TUBE SIZE 16 RYLES TUBE SIZE 18 TOLPERISONE SR 150 MG TAB BLOOD TRANSFUSION SET NORMAL SALINE 1000 ML SYP PARACETAMOL 162 MG + IBUPROFEN 100 MG 60 ML SYP CEFACLOR 125 MG/5 ML INJ ZOLEDRONIC ACID 5 MG DOXOPHYLLINE 400 MG TAB VACCUM BLOOD COLLECTION TUBE WITH GEL INJ PROGESTERONE 100 MG/ML INJ BENDAMUSTINE 100 MGM	1 10 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	NO N	SOS SOS	SOS LA SOS LA SOS SOS SOS SOS SOS SOS SOS SOS SOS SO	V V V D D D D D D D D D D D D D D D D D
1313 1314 1315 1316 1317 1318 1319 1320 1321 1322 1323 1324 1325 1326 1327 1328 1329 1330 1331 1332 1333 1334 1335 1336	4786 4789 4795 4800 4818 4820 4829 4830 4831 4833 4834 4835 4837 4838 4839 4844 4847 4849 4850 4851 4877 4883 4895	12451 12207 10886 10588	CAPD FLUID 7.5 % 2 LTR CAPD FLUID 2.5 % 5 LTR DICLOFENAC GEL OF 10 GM (VOVRAN) IV SET N95 MASK NELATON CATHETER 12 FR NORMAL SALINE FLUID (SODIUM CHLORIDE 0.9 %- 500 ML) INJ ETOPHYLLINE 84.7 + THEOPHYLLINE 25.3 /ML COLOSTOMY WAFER 45 MM MALE EXTERNAL CONDOM CATHETER SIZE L MALE EXTERNAL CONDOM CATHETER SIZE L MALE EXTERNAL CONDOM CATHETER SIZE S UROSTOMY BAG 50 MM URI-COND MALE CATH 25 MM HCV TEST KIT RYLES TUBE SIZE 16 RYLES TUBE SIZE 18 TOLPERISONE SR 150 MG TAB BLOOD TRANSFUSION SET NORMAL SALINE 1000 ML SYP PARACETAMOL 162 MG + IBUPROFEN 100 MG 60 ML SYP CEFACLOR 125 MG/5 ML INJ ZOLEDRONIC ACID 5 MG DOXOPHYLLINE 400 MG TAB VACCUM BLOOD COLLECTION TUBE WITH GEL INJ PROGESTERONE 100 MG/ML	1 10 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	NO N	sos sos Local apply once a day sos sos sos sos sos sos sos sos sos so	SOS LA SOS LA SOS SOS SOS SOS SOS SOS SOS SOS SOS SO	V V V D D D E E E E V V D D D D D D V
1313 1314 1315 1316 1317 1318 1319 1320 1321 1322 1323 1324 1325 1326 1327 1328 1329 1330 1331 1332 1333 1334 1335 1336 1337	4786 4789 4789 4789 4800 4818 4820 4829 4830 4831 4833 4834 4835 4837 4838 4839 4844 4847 4849 4850 4851 4877 4883 4895 4900 4901	12451 12451 12207 10886 10588 11751 13916 12098	CAPD FLUID 7.5 % 2 LTR CAPD FLUID 2.5 % 5 LTR DICLOFENAC GEL OF 10 GM (VOVRAN) IV SET N95 MASK NELATON CATHETER 12 FR NORMAL SALINE FLUID (SODIUM CHLORIDE 0.9 %- 500 ML) INJ ETOPHYLLINE 84.7 + THEOPHYLLINE 25.3 /ML COLOSTOMY WAFER 45 MM MALE EXTERNAL CONDOM CATHETER SIZE L MALE EXTERNAL CONDOM CATHETER SIZE S UROSTOMY BAG 50 MM URI-COND MALE CATH 25 MM HCV TEST KIT RYLES TUBE SIZE 16 RYLES TUBE SIZE 18 TOLPERISONE SR 150 MG TAB BLOOD TRANSFUSION SET NORMAL SALINE 1000 ML SYP PARACETAMOL 162 MG + IBUPROFEN 100 MG 60 ML SYP CEFACLOR 125 MG/5 ML INJ ZOLEDRONIC ACID 5 MG DOXOPHYLLINE 400 MG TAB VACCUM BLOOD COLLECTION TUBE WITH GEL INJ PROGESTERONE 100 MG/ML INJ BENDAMUSTINE 100 MGM TAFLUPROST 0.0015% 2.5 ML	1 10 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	NO N	sos sos sos Local apply once a day sos sos sos sos sos sos sos sos sos so	SOS LA SOS SOS SOS SOS SOS SOS SOS SOS SOS SO	V V V V D D D D D D D D D D D D D D D D
1313 1314 1315 1316 1317 1318 1319 1320 1321 1322 1323 1324 1325 1326 1327 1328 1329 1330 1331 1332 1333 1334 1335 1336 1337	4786 4789 4795 4800 4818 4820 4829 4830 4831 4833 4834 4835 4837 4838 4839 4844 4847 4849 4850 4851 4877 4883 4895	12451 12451 12451 12451 13916	CAPD FLUID 7.5 % 2 LTR CAPD FLUID 2.5 % 5 LTR DICLOFENAC GEL OF 10 GM (VOVRAN) IV SET N95 MASK NELATON CATHETER 12 FR NORMAL SALINE FLUID (SODIUM CHLORIDE 0.9 %- 500 ML) INJ ETOPHYLLNE 84.7 + THEOPHYLLINE 25.3 /ML COLOSTOMY WAFER 45 MM MALE EXTERNAL CONDOM CATHETER SIZE L MALE EXTERNAL CONDOM CATHETER SIZE S UROSTOMY BAG 50 MM URI-COND MALE CATH 25 MM HCV TEST KIT RYLES TUBE SIZE 16 RYLES TUBE SIZE 18 TOLPERISONE SR 150 MG TAB BLOOD TRANSFUSION SET NORMAL SALINE 1000 ML SYP PARACETAMOL 162 MG + IBUPPOFEN 100 MG 60 ML SYP CEFACLOR 125 MG/5 ML INJ ZOLEDRONIC ACID 5 MG DOXOPHYLLINE 400 MG TAB VACCUM BLOOD COLLECTION TUBE WITH GEL INJ PROGESTERONE 100 MG/ML INJ BENDAMUSTINE 100 MGM TAFLUPROST 0.0015% 2.5 ML ROTACAP SALMETEROL 50	1 10 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	NO N	sos sos Local apply once a day sos sos sos sos sos sos sos sos sos so	SOS LA SOS LA SOS SOS SOS SOS SOS SOS SOS SOS SOS SO	V V V D D D D D D D D D D D D D D D D D
1313 1314 1315 1316 1317 1318 1319 1320 1321 1322 1323 1324 1325 1326 1327 1328 1329 1330 1331 1332 1333 1334 1335 1336 1337	4786 4789 4789 4789 4800 4818 4820 4829 4830 4831 4833 4834 4835 4837 4838 4839 4844 4847 4849 4850 4851 4877 4883 4895 4900 4901	12451 12451 12207 10886 10588 11751 13916 12098	CAPD FLUID 7.5 % 2 LTR CAPD FLUID 2.5 % 5 LTR DICLOFENAC GEL OF 10 GM (VOVRAN) IV SET N95 MASK NELATON CATHETER 12 FR NORMAL SALINE FLUID (SODIUM CHLORIDE 0.9 %- 500 ML) INJ ETOPHYLLINE 84.7 + THEOPHYLLINE 25.3 /ML COLOSTOMY WAFER 45 MM MALE EXTERNAL CONDOM CATHETER SIZE L MALE EXTERNAL CONDOM CATHETER SIZE S UROSTOMY BAG 50 MM URI-COND MALE CATH 25 MM HCV TEST KIT RYLES TUBE SIZE 16 RYLES TUBE SIZE 18 TOLPERISONE SR 150 MG TAB BLOOD TRANSFUSION SET NORMAL SALINE 1000 ML SYP PARACETAMOL 162 MG + IBUPROFEN 100 MG 60 ML SYP CEFACLOR 125 MG/5 ML INJ ZOLEDRONIC ACID 5 MG DOXOPHYLLINE 400 MG TAB VACCUM BLOOD COLLECTION TUBE WITH GEL INJ PROGESTERONE 100 MG/ML INJ BENDAMUSTINE 100 MGM TAFLUPROST 0.0015% 2.5 ML	1 10 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	NO N	sos sos sos Local apply once a day sos sos sos sos sos sos sos sos sos so	SOS LA SOS SOS SOS SOS SOS SOS SOS SOS SOS SO	V V V V D D D D D D D D D D D D D D D D

						1		
1341	4939		SYP LACTULOSE 200 ML	200	ML	1 tsp x od	After Meal	V
1342	4952	11107	INJ DILTIAZEM	1	NO	1 x od	After Meal	D
1343	4955		INJ CALCITROL 1 ML	1	MG	1 x od	After Meal	D
1344	4960		ROLLER BANDAGE 2CM	1	NO	sos	SOS	D
1345	4961		COTTON 300 GM	1	NO	sos	SOS	D
1346			INJ METHYLCOBALAMIN 1500	1	NO	1 x bd	After Meal	D
			MCG					
1347		11525	INJ FUROSEMIDE 10MG /ML	1	MG	1 x od	After Meal	D
1348	4977	12409	BUDESONIDE 3 MG CAP	1	MG	1 x od	After Meal	D
1349	4983	10780	OLAPARIB 100 MG TAB	1	MG	1 x od	After Meal	D
1350			S AMLODIPINE 2. 5 MGTAB	1	MG	1 x od	After Meal	D
1351	4996	11904	INJ METHOXY	1	NO	1 x od	After Meal	D
			POLYETHYLENE 50 MG					
			(MIRCERA)					
1352	4999	13902	DEXAMETHASONE 4MG TAB	60	NO	sos	SOS	٧
1353	5003	10709	BOSUTINIB 500 MG TAB	15	GM	Local apply once a	After Meal	Ė
.000	0000	10700	2000111112 000 1110 1712	.0	0	day	Aitoi moui	_
1354	5007		COLOSTOMY BAG 60 MM	1	MG	1 x od	After Meal	Е
1355	5013	10839	MERCAPTOPURINE TAB 50 mg	1	NO	1 x bd	After Meal	Ē
1333	3013	10033	MERCAPTOFORME TAB 30 mg	•	NO	I A Du	Aitei Meai	-
1356		10807	CHLORAMBUCIL 2 MG TAB	1	MG	1 x od	After Meal	Е
1356		10702	AFATINIB 40 MG TAB	1		1 x od	SOSI	E
					mg			
1358	F000	10284	INJ MORPHINE 15 MG	11	MG	SOS	After Meal	E
1359	5029		LINT ABSORBENT	1	NO	1 x od	After Meal	<u> </u>
1360	5030		DRESSING STERILE ADHESIVE	1	MG	1 x od	sos	E
4001			041175				0.55	
1361	5031		GAUZE FOLDED	1	NO	sos	SOS	E
1362	5032		GABAPENTIN 300MG +	1	mg	1 x od	After Meal	E
			METHYLCOBALAMIN 1500					
			MCG TAB					
1363	5033	11050	INJ NIVOLUMAB 40 MG	1	NO	1 x od	After Meal	D
1364	5036	10840	INJ OXALIPLATIN 100 MG	1	NO	1 x od	After Meal	D
1365	5037	10823	INJ FLUOROURACIL 500 MG	1	NO	1 x od	After Meal	D
1366	5039	11664	INJ GRANISETRON 1 MG	1	NO	1 x od	After Meal	D
1367	5044		ED NETARSUDIL 0.02%	5	ML	1 Drop twice a day	After Meal	D
1368	5048	11185	INJ LABETALOL 5 MG/ML	1	NO	sos	sos	٧
1369		10844	INJ OXALIPLATIN 50 MG	1	NO	1 x od	After Meal	D
1370	FACE					4 1	After Meal	D
	อบชอ	11991	I INJ ANIDULAFUNGIN 100 MG	1	NO	1 x od		
	5065 5072	11991	INJ ANIDULAFUNGIN 100 MG BRIVARACETAM 75 MG TAB					U
1371	5072	11991	BRIVARACETAM 75 MG TAB	1	MG	1 x bd	After Meal	
1371 1372	5072 5074	11991	BRIVARACETAM 75 MG TAB IV CANULA SIZE 22 G	1	MG no	1 x bd sos	After Meal SOS	D
1371 1372 1373	5072 5074 5075	11991	BRIVARACETAM 75 MG TAB IV CANULA SIZE 22 G COLOPLAST 1910	1 1 1	MG no no	1 x bd sos sos	After Meal SOS SOS	D E
1371 1372 1373 1374	5072 5074		BRIVARACETAM 75 MG TAB IV CANULA SIZE 22 G COLOPLAST 1910 HOLLISTER 34500	1 1 1	MG no no no	1 x bd sos sos sos	After Meal SOS SOS SOS	D E E
1371 1372 1373	5072 5074 5075	11991	BRIVARACETAM 75 MG TAB IV CANULA SIZE 22 G COLOPLAST 1910 HOLLISTER 34500 INJ HUMAN INSULIN	1 1 1	MG no no	1 x bd sos sos	After Meal SOS SOS	D E
1371 1372 1373 1374	5072 5074 5075		BRIVARACETAM 75 MG TAB IV CANULA SIZE 22 G COLOPLAST 1910 HOLLISTER 34500	1 1 1	MG no no no	1 x bd sos sos sos	After Meal SOS SOS SOS	D E E
1371 1372 1373 1374 1375	5072 5074 5075 5076	11992	BRIVARACETAM 75 MG TAB IV CANULA SIZE 22 G COLOPLAST 1910 HOLLISTER 34500 INJ HUMAN INSULIN GLARGINE 300IU/ML 3ML CART	1 1 1 1 300	MG no no no UNIT	1 x bd sos sos sos 10 unit x od	After Meal SOS SOS SOS After breakfast	D E E E
1371 1372 1373 1374 1375	5072 5074 5075 5076 5106		BRIVARACETAM 75 MG TAB IV CANULA SIZE 22 G COLOPLAST 1910 HOLLISTER 34500 INJ HUMAN INSULIN GLARGINE 300IU/ML 3ML CART NORADRENALINE 2MG INJ	1 1 1 1 300	MG no no no UNIT	1 x bd	After Meal SOS SOS SOS After breakfast After Meal	D E E E
1371 1372 1373 1374 1375 1376 1377	5072 5074 5075 5076 5106 5126	11992	BRIVARACETAM 75 MG TAB IV CANULA SIZE 22 G COLOPLAST 1910 HOLLISTER 34500 INJ HUMAN INSULIN GLARGINE 300IU/ML 3ML CART NORADRENALINE 2MG INJ THERMOMETER	1 1 1 1 300	MG no no no UNIT	1 x bd	After Meal SOS SOS SOS After breakfast After Meal SOS	D E E E
1371 1372 1373 1374 1375 1376 1377 1378	5072 5074 5075 5076 5106 5126 5132	11992 10319 15809	BRIVARACETAM 75 MG TAB IV CANULA SIZE 22 G COLOPLAST 1910 HOLLISTER 34500 INJ HUMAN INSULIN GLARGINE 300IU/ML 3ML CART NORADRENALINE 2MG INJ THERMOMETER LORLATINIB 100 MG TAB	1 1 1 300	MG no no no UNIT	1 x bd	After Meal SOS SOS SOS After breakfast After Meal SOS After Meal	D E E E V E
1371 1372 1373 1374 1375 1376 1377 1378 1379	5072 5074 5075 5076 5076 5106 5126 5132 5133	11992 10319 15809 15808	BRIVARACETAM 75 MG TAB IV CANULA SIZE 22 G COLOPLAST 1910 HOLLISTER 34500 INJ HUMAN INSULIN GLARGINE 300IU/ML 3ML CART NORADRENALINE 2MG INJ THERMOMETER LORLATINIB 100 MG TAB LORLATINIB 25 MG TAB	1 1 1 300	MG no no no UNIT NO NO mg	1 x bd	After Meal SOS SOS SOS After breakfast After Meal SOS After Meal After Meal	D E E E V E
1371 1372 1373 1374 1375 1376 1377 1378	5072 5074 5075 5076 5106 5126 5132	11992 10319 15809	BRIVARACETAM 75 MG TAB IV CANULA SIZE 22 G COLOPLAST 1910 HOLLISTER 34500 INJ HUMAN INSULIN GLARGINE 300IU/ML 3ML CART NORADRENALINE 2MG INJ THERMOMETER LORLATINIB 100 MG TAB LORLATINIB 25 MG TAB METHYLPHENIDATE 10 MG	1 1 1 300	MG no no no UNIT	1 x bd	After Meal SOS SOS SOS After breakfast After Meal SOS After Meal	D E E E V E
1371 1372 1373 1374 1375 1376 1377 1378 1379 1380	5072 5074 5075 5076 5106 5126 5132 5133 5135	11992 10319 15809 15808	BRIVARACETAM 75 MG TAB IV CANULA SIZE 22 G COLOPLAST 1910 HOLLISTER 34500 INJ HUMAN INSULIN GLARGINE 300IU/ML 3ML CART NORADRENALINE 2MG INJ THERMOMETER LORLATINIB 100 MG TAB LORLATINIB 25 MG TAB METHYLPHENIDATE 10 MG TAB	1 1 1 300	MG no no no UNIT NO NO mg mg NO	1 x bd	After Meal SOS SOS SOS After breakfast After Meal SOS After Meal After Meal After Meal	D E E E V E E
1371 1372 1373 1374 1375 1376 1377 1378 1379	5072 5074 5075 5076 5076 5106 5126 5132 5133	11992 10319 15809 15808	BRIVARACETAM 75 MG TAB IV CANULA SIZE 22 G COLOPLAST 1910 HOLLISTER 34500 INJ HUMAN INSULIN GLARGINE 300IU/ML 3ML CART NORADRENALINE 2MG INJ THERMOMETER LORLATINIB 100 MG TAB LORLATINIB 25 MG TAB METHYLPHENIDATE 10 MG	1 1 1 300	MG no no no UNIT NO NO mg	1 x bd	After Meal SOS SOS SOS After breakfast After Meal SOS After Meal After Meal	D E E E V E
1371 1372 1373 1374 1375 1376 1377 1378 1379 1380	5072 5074 5075 5076 5106 5126 5132 5133 5135 5136	11992 10319 15809 15808	BRIVARACETAM 75 MG TAB IV CANULA SIZE 22 G COLOPLAST 1910 HOLLISTER 34500 INJ HUMAN INSULIN GLARGINE 300IU/ML 3ML CART NORADRENALINE 2MG INJ THERMOMETER LORLATINIB 100 MG TAB LORLATINIB 25 MG TAB METHYLPHENIDATE 5 MG TAB	1 1 1 300	MG no no no UNIT NO mg mg NO MG	1 x bd	After Meal SOS SOS SOS After breakfast After Meal SOS After Meal After Meal After Meal After Meal After Meal	D E E E V E E V
1371 1372 1373 1374 1375 1376 1377 1378 1379 1380	5072 5074 5075 5076 5106 5126 5132 5133 5135	11992 10319 15809 15808	BRIVARACETAM 75 MG TAB IV CANULA SIZE 22 G COLOPLAST 1910 HOLLISTER 34500 INJ HUMAN INSULIN GLARGINE 300IU/ML 3ML CART NORADRENALINE 2MG INJ THERMOMETER LORLATINIB 100 MG TAB LORLATINIB 25 MG TAB METHYLPHENIDATE 10 MG TAB	1 1 1 300	MG no no no UNIT NO NO mg mg NO	1 x bd	After Meal SOS SOS SOS After breakfast After Meal SOS After Meal After Meal After Meal	D E E E V E E
1371 1372 1373 1374 1375 1376 1377 1378 1380 1381	5072 5074 5075 5076 5106 5126 5132 5133 5135 5136 5137	11992 10319 15809 15808	BRIVARACETAM 75 MG TAB IV CANULA SIZE 22 G COLOPLAST 1910 HOLLISTER 34500 INJ HUMAN INSULIN GLARGINE 300IU/ML 3ML CART NORADRENALINE 2MG INJ THERMOMETER LORLATINIB 100 MG TAB LORLATINIB 25 MG TAB METHYLPHENIDATE 10 MG TAB METHYLPHENIDATE 5 MG TAB IRRIGATION COLOSTOMY KIT	1 1 1 300	MG no no no UNIT NO NO MG MG	1 x bd	After Meal SOS SOS SOS After breakfast After Meal SOS After Meal	D E E E V E V E
1371 1372 1373 1374 1375 1376 1377 1378 1380 1381 1382 1382	5072 5074 5075 5076 5106 5126 5132 5133 5135 5136 5137	11992 10319 15809 15808 10532	BRIVARACETAM 75 MG TAB IV CANULA SIZE 22 G COLOPLAST 1910 HOLLISTER 34500 INJ HUMAN INSULIN GLARGINE 300IU/ML 3ML CART NORADRENALINE 2MG INJ THERMOMETER LORLATINIB 100 MG TAB LORLATINIB 25 MG TAB METHYLPHENIDATE 10 MG TAB METHYLPHENIDATE 5 MG TAB IRRIGATION COLOSTOMY KIT DIMENHYDRINATE 50 MG TAB	1 1 1 300	MG no no no UNIT NO NO mg MG NO MG MG	1 x bd	After Meal SOS SOS SOS After breakfast After Meal SOS After Meal After Meal After Meal After Meal After Meal After Meal SOS After Meal After Meal	D E E E V E V
1371 1372 1373 1374 1375 1376 1377 1378 1379 1380 1381 1382	5072 5074 5075 5076 5106 5126 5132 5133 5135 5136 5137 5138 5149	11992 10319 15809 15808	BRIVARACETAM 75 MG TAB IV CANULA SIZE 22 G COLOPLAST 1910 HOLLISTER 34500 INJ HUMAN INSULIN GLARGINE 300IU/ML 3ML CART NORADRENALINE 2MG INJ THERMOMETER LORLATINIB 100 MG TAB LORLATINIB 25 MG TAB METHYLPHENIDATE 10 MG TAB METHYLPHENIDATE 5 MG TAB IRRIGATION COLOSTOMY KIT DIMENHYDRINATE 50 MG TAB TAB METOPROLOL 50 MG	1 1 1 300	MG no no no UNIT NO NO MG MG	1 x bd	After Meal SOS SOS SOS After breakfast After Meal SOS After Meal	D E E E V E V E
1371 1372 1373 1374 1375 1376 1377 1378 1380 1381 1382 1382	5072 5074 5075 5076 5106 5126 5132 5133 5135 5136 5137	11992 10319 15809 15808 10532	BRIVARACETAM 75 MG TAB IV CANULA SIZE 22 G COLOPLAST 1910 HOLLISTER 34500 INJ HUMAN INSULIN GLARGINE 300IU/ML 3ML CART NORADRENALINE 2MG INJ THERMOMETER LORLATINIB 100 MG TAB LORLATINIB 25 MG TAB METHYLPHENIDATE 10 MG TAB METHYLPHENIDATE 5 MG TAB IRRIGATION COLOSTOMY KIT DIMENHYDRINATE 50 MG TAB	1 1 1 300	MG no no no UNIT NO NO mg MG NO MG MG	1 x bd	After Meal SOS SOS SOS After breakfast After Meal SOS After Meal After Meal After Meal After Meal After Meal After Meal SOS After Meal After Meal	D E E E V E V E E V
1371 1372 1373 1374 1375 1376 1377 1378 1379 1380 1381 1382	5072 5074 5075 5076 5106 5126 5132 5133 5135 5136 5137 5138 5149	11992 10319 15809 15808 10532	BRIVARACETAM 75 MG TAB IV CANULA SIZE 22 G COLOPLAST 1910 HOLLISTER 34500 INJ HUMAN INSULIN GLARGINE 300IU/ML 3ML CART NORADRENALINE 2MG INJ THERMOMETER LORLATINIB 100 MG TAB LORLATINIB 25 MG TAB METHYLPHENIDATE 10 MG TAB METHYLPHENIDATE 5 MG TAB IRRIGATION COLOSTOMY KIT DIMENHYDRINATE 50 MG TAB TAB METOPROLOL 50 MG	1 1 1 300	MG no no no UNIT NO NO mg mg NO MG MG NO mg	1 x bd	After Meal SOS SOS SOS After breakfast After Meal SOS After Meal	D E E E V E V E
1371 1372 1373 1374 1375 1376 1377 1378 1379 1380 1381 1382	5072 5074 5075 5076 5106 5126 5132 5133 5135 5136 5137 5138 5149	11992 10319 15809 15808 10532	BRIVARACETAM 75 MG TAB IV CANULA SIZE 22 G COLOPLAST 1910 HOLLISTER 34500 INJ HUMAN INSULIN GLARGINE 300IU/ML 3ML CART NORADRENALINE 2MG INJ THERMOMETER LORLATINIB 100 MG TAB LORLATINIB 25 MG TAB METHYLPHENIDATE 10 MG TAB METHYLPHENIDATE 5 MG TAB IRRIGATION COLOSTOMY KIT DIMENHYDRINATE 50 MG TAB TAB METOPROLOL 50 MG GLUCOSAMINE 750 MG +	1 1 1 300	MG no no no UNIT NO NO mg mg NO MG MG NO mg	1 x bd	After Meal SOS SOS SOS After breakfast After Meal SOS After Meal	D E E E V E V E
1371 1372 1373 1374 1375 1376 1377 1378 1379 1380 1381 1382 1383 1384 1385	5072 5074 5075 5076 5106 5126 5132 5133 5135 5136 5137 5138 5149 5154	11992 10319 15809 15808 10532	BRIVARACETAM 75 MG TAB IV CANULA SIZE 22 G COLOPLAST 1910 HOLLISTER 34500 INJ HUMAN INSULIN GLARGINE 300IU/ML 3ML CART NORADRENALINE 2MG INJ THERMOMETER LORLATINIB 100 MG TAB LORLATINIB 25 MG TAB METHYLPHENIDATE 10 MG TAB IRRIGATION COLOSTOMY KIT DIMENHYDRINATE 50 MG TAB TAB METOPROLOL 50 MG GLUCOSAMINE 750 MG + DIACERINE 50 MG TAB	1 1 1 300	MG no no no UNIT NO NO mg mg MG NO MG MG NO mg mg mg NO	1 x bd	After Meal SOS SOS SOS After breakfast After Meal SOS After Meal	D E E E V E V E E E E E E E E E E E E
1371 1372 1373 1374 1375 1376 1377 1378 1379 1380 1381 1382 1383 1384 1385	5072 5074 5075 5076 5106 5126 5132 5133 5135 5136 5137 5138 5149 5154	11992 10319 15809 15808 10532	BRIVARACETAM 75 MG TAB IV CANULA SIZE 22 G COLOPLAST 1910 HOLLISTER 34500 INJ HUMAN INSULIN GLARGINE 300IU/ML 3ML CART NORADRENALINE 2MG INJ THERMOMETER LORLATINIB 100 MG TAB LORLATINIB 25 MG TAB METHYLPHENIDATE 10 MG TAB METHYLPHENIDATE 5 MG TAB IRRIGATION COLOSTOMY KIT DIMENHYDRINATE 50 MG TAB TAB METOPROLOL 50 MG GLUCOSAMINE 750 MG + DIACERINE 50 MG TAB STERILE GAUZE 4" X 4" PKT	1 1 1 300	MG no no no UNIT NO NO mg mg MG NO MG MG NO mg mg mg NO	1 x bd	After Meal SOS SOS SOS After breakfast After Meal SOS After Meal	D E E E V E V E E E E
1371 1372 1373 1374 1375 1376 1377 1378 1379 1380 1381 1382 1383 1384 1385	5072 5074 5075 5076 5106 5126 5132 5133 5135 5136 5137 5138 5149 5154	11992 10319 15809 15808 10532	BRIVARACETAM 75 MG TAB IV CANULA SIZE 22 G COLOPLAST 1910 HOLLISTER 34500 INJ HUMAN INSULIN GLARGINE 300IU/ML 3ML CART NORADRENALINE 2MG INJ THERMOMETER LORLATINIB 100 MG TAB LORLATINIB 25 MG TAB METHYLPHENIDATE 10 MG TAB METHYLPHENIDATE 5 MG TAB IRRIGATION COLOSTOMY KIT DIMENHYDRINATE 50 MG TAB TAB METOPROLOL 50 MG GLUCOSAMINE 750 MG + DIACERINE 50 MG TAB STERILE GAUZE 4" X 4" PKT OF 5	1 1 1 300 1 1 1 1 1 1 1 1 1	MG no no no UNIT NO NO mg mg NO MG MG NO mg MG NO MG NO MG MG MG NO MG MG NO MG MG MG NO MG MG NO MG MG MG NO MG MG MG MG NO MG MG MG NO MG MG MG MG MG MG MG MG MG MG	1 x bd	After Meal SOS SOS SOS After breakfast After Meal SOS After Meal SOS After Meal SOS After Meal SOS After Meal SOS After Meal After Meal	D E E E V E V E
1371 1372 1373 1374 1375 1376 1377 1378 1379 1380 1381 1382 1383 1384 1385	5072 5074 5075 5076 5106 5126 5132 5133 5135 5136 5137 5138 5149 5154 5157 5159 5160	11992 10319 15809 15808 10532 111147	BRIVARACETAM 75 MG TAB IV CANULA SIZE 22 G COLOPLAST 1910 HOLLISTER 34500 INJ HUMAN INSULIN GLARGINE 300IU/ML 3ML CART NORADRENALINE 2MG INJ THERMOMETER LORLATINIB 100 MG TAB LORLATINIB 25 MG TAB METHYLPHENIDATE 10 MG TAB IRRIGATION COLOSTOMY KIT DIMENHYDRINATE 50 MG TAB TAB METOPROLOL 50 MG GLUCOSAMINE 750 MG + DIACERINE 50 MG TAB STERILE GAUZE 4" X 4" PKT OF 5 NICORANDIL 5 MG TAB OLMESARTAN 40 MG TAB	1 1 1 300 1 1 1 1 1 1 1 1 1 1 1 1	MG no no no no UNIT NO mg mg NO MG NO mg mg pkt mg mg	1 x bd	After Meal SOS SOS SOS After breakfast After Meal SOS After Meal After Meal After Meal After Meal After Meal After Meal After Meal After Meal SOS After Meal After Meal After Meal After Meal After Meal After Meal After Meal After Meal After Meal After Meal After Meal After Meal	D E E E E V E V E E D E E E E E E E E E
1371 1372 1373 1374 1375 1376 1377 1378 1379 1380 1381 1382 1383 1384 1385	5072 5074 5075 5076 5106 5126 5132 5133 5135 5136 5137 5138 5149 5154 5157	11992 10319 15809 15808 10532	BRIVARACETAM 75 MG TAB IV CANULA SIZE 22 G COLOPLAST 1910 HOLLISTER 34500 INJ HUMAN INSULIN GLARGINE 300IU/ML 3ML CART NORADRENALINE 2MG INJ THERMOMETER LORLATINIB 100 MG TAB LORLATINIB 25 MG TAB METHYLPHENIDATE 10 MG TAB METHYLPHENIDATE 5 MG TAB IRRIGATION COLOSTOMY KIT DIMENHYDRINATE 50 MG TAB TAB METOPROLOL 50 MG GLUCOSAMINE 750 MG + DIACERINE 50 MG TAB STERILE GAUZE 4" X 4" PKT OF 5 NICORANDIL 5 MG TAB OLMESARTAN 40 MG TAB RANIBIZUMAB 10 MG/ML INJ	1 1 1 300 1 1 1 1 1 1 1 1 1 1 1 1 1	MG no no no UNIT NO mg mg NO MG MG NO mg mg pkt mg	1 x bd	After Meal SOS SOS SOS After breakfast After Meal SOS After Meal After Meal After Meal After Meal After Meal After Meal After Meal After Meal SOS After Meal SOS After Meal After Meal SOS After Meal After Meal After Meal After Meal	D E E E V E V E D E E E E E E E E E
1371 1372 1373 1374 1375 1376 1377 1378 1379 1380 1381 1382 1383 1384 1385 1386 1387 1388 1389	5072 5074 5075 5076 5106 5126 5132 5133 5135 5136 5137 5138 5149 5154 5157 5159 5160 5162	11992 10319 15809 15808 10532 111147	BRIVARACETAM 75 MG TAB IV CANULA SIZE 22 G COLOPLAST 1910 HOLLISTER 34500 INJ HUMAN INSULIN GLARGINE 300IU/ML 3ML CART NORADRENALINE 2MG INJ THERMOMETER LORLATINIB 100 MG TAB LORLATINIB 25 MG TAB METHYLPHENIDATE 10 MG TAB METHYLPHENIDATE 5 MG TAB IRRIGATION COLOSTOMY KIT DIMENHYDRINATE 50 MG TAB TAB METOPROLOL 50 MG GLUCOSAMINE 750 MG TAB STERILE GAUZE 4" X 4" PKT OF 5 NICORANDIL 5 MG TAB OLMESARTAN 40 MG TAB RANIBIZUMAB 10 MG/ML INJ PFS	1 1 1 300 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	MG no no no UNIT NO NO mg mg NO MG NO mg pt mg no no NO mg mg no	1 x bd	After Meal SOS SOS SOS SOS After breakfast After Meal SOS After Meal After Meal After Meal After Meal After Meal After Meal After Meal After Meal After Meal SOS After Meal After Meal After Meal After Meal Not in List / Others	D E E E V E V E D E E E E E E E E E E E
1371 1372 1373 1374 1375 1376 1377 1378 1379 1380 1381 1382 1383 1384 1385	5072 5074 5075 5076 5106 5126 5132 5133 5135 5136 5137 5138 5149 5154 5157 5159 5160	11992 10319 15809 15808 10532 11147 11207 16112 13409	BRIVARACETAM 75 MG TAB IV CANULA SIZE 22 G COLOPLAST 1910 HOLLISTER 34500 INJ HUMAN INSULIN GLARGINE 300IU/ML 3ML CART NORADRENALINE 2MG INJ THERMOMETER LORLATINIB 100 MG TAB LORLATINIB 25 MG TAB METHYLPHENIDATE 10 MG TAB METHYLPHENIDATE 5 MG TAB IRRIGATION COLOSTOMY KIT DIMENHYDRINATE 50 MG TAB TAB METOPROLOL 50 MG GLUCOSAMINE 750 MG + DIACERINE 50 MG TAB STERILE GAUZE 4" X 4" PKT OF 5 NICORANDIL 5 MG TAB OLMESARTAN 40 MG TAB RANIBIZUMAB 10 MG/ML INJ	1 1 1 300 1 1 1 1 1 1 1 1 1 1 1 1 1	MG no no no no UNIT NO mg mg NO MG NO mg mg pkt mg mg	1 x bd	After Meal SOS SOS SOS After breakfast After Meal SOS After Meal After Meal After Meal After Meal After Meal After Meal After Meal After Meal SOS After Meal After Meal After Meal After Meal After Meal After Meal After Meal After Meal After Meal After Meal After Meal After Meal	D E E E V E V E D E E E E E E E E

1392	5171		LEVODOPA 200 MG +	1	mg	1 x bd	After Meal	Е
1393	5178	11792	CARBIDOPA 50 MG CR TAB ALENDRONATE SODIUM 70	1	ma	1 x weekly	After Meal	D
1393	31/8	11/92	MG TAB		mg	i x weekiy	Aiter Wear	U
1394	5185	11024	DARATUMUNAB 400 MG INJ	1	mg	1 x od	Not in List / Others	D
1395	5186	10595	MESALAZINE 500 MG	1	mg	1 x od	After Meal	D
4200	E400	40500	PROLONGED RELEASE TAB	4		4 v od	After Mr1	v
1396	5188	10560	SODIUM VALPROATE 200 MG TAB	1	mg	1 x od	After Meal	V
1397	5189		NELATON CATHETER 16	1	no	sos	Not in List / Others	٧
1398	5194		RANOLAZINE SR 500 MG TAB	1	mg	1 x od	After Meal	٧
1399	5216	12110	FLUTICASONE FUROATE 27.5	10	puff	1 Puff x OD	Not in List / Others	V
1400	5218	10681	MCG NASAL SPRAY CHLOROQUINE PHOSPHATE	1	mg	1 x bd	After Meal	V
1400	32 10	10001	250 MG TAB	'	iiig	1 A DU	Aiter Mear	ď
1401	5222	11025	HEPARIN 5000 IU/ML INJ	1	no	1 x od	Not in List / Others	Е
1402	5223	13268	MEROPENEM 500 MG INJ	11	no	1 x od	After Meal	V
1403	5227		DRESSING MEDICATED	1	no	sos	sos	
			ADHESIVE 25 CM X 6 CM IN A SINGLE STRIP PACK					
1404	5228		DRESSING MEDICATED	1	no	sos	SOS	D
			GAUZE PARAFFIN, 10 CM X10					
440=	400=	44644	CM. TIN OF 24			I a sal a d		
1405	4237	11314	CALAMINE POWDER PACKET OF 400 GM	1	no	Local apply as required	LA	D
1406	5240	11691	PANCREATIN 10000 IU TAB	1	mg	1 x od	After Meal	D
1407	5241		COLOSTOMY BELT	1	no	sos	SOS	D
1408		11153	INJ SODIUM NITROPRUSSIDE	1	MG	sos	sos	E
1409	5246		50 MG CERVICAL COLLAR XL	1	no	505	SOS	D
1410	5246	12916	COLCHICINE 0.5 MG TAB	1	no mg	sos 1 x od	After Meal	D D
1411	5255	10889	EVEROLIMUS 5 MG TAB	1	mg	1 x od	After Meal	D
1412	5258	11318	CLINDAMYCIN 1% GEL 10 GM	10	gm	Local apply once a	LA	V
4410	5000	444=4	PROPERTY OF THE SECTION			dav	A64 24	-
1413	5260	11151	PROPRANOLOL T/R 40 MG TAB	1	mg	1 x od	After Meal	E
1414	5276		LACTITOL (10GM) +	1	no	sos	sos	D
			ISPAGHULA (3.5GM) POWDER					
			` '					
1415	5282		CEFPODOXIME PROXETIL 50	30	ml	2 tsp x bd	After Meal	D
1416	5300	12068	MG SYP ORAL SUSPENSION RIPASUDIL (0.4% W/V) EYE	5	ml	1 Drop twice a day	Twice a day	D
.410	3300	12000	DROPS	J	1111	Diop twice a day	i wice a day	
1417	5303		PACLITAXEL INJECTION	1	no	sos	sos	٧
1418	5305		PRIMIDONE (12.5MG) TAB	1	mg	1 x od	After Meal	٧
1419	5307		CLAVICLE SUPPORT MEDIUM SIZE	1	no	sos	sos	D
1420	5308		ORTHO BANDAGE	1	no	sos	SOS	D
1421	5309		ORTHO ROLL CAST PADDING	1	no	sos	SOS	D
1422	5310	012081	BRIMONIDINE 0.2% + TIMOLOL	5	ml	1 Drop twice a day	LA	D
1400	F244		0.5% EYE DROPS	4			000	
1423 1424	5311 35	12609	SYRINGE 50 ML ALFUZOSIN 10 MG TAB	1	no mg	sos 1 x od	SOS After Meal	D D
1425		11790	THYROXINE 100 MCG TAB	1	MG	1XOD	after meals	D
1426	96	11738	HYDROXYPROGESTERONE	1	mg	1 x od	Not in List / Others	D
		44500	500 MG				464	
1427	97	11793	INJ HCG 5000IU	1	mg	Local apply once a	After Meal	E
1428	175	11176	AMLODIPINE 5 MG TAB	1	mg	day 1 x od	After breakfast	٧
1429	176	10824	INJ TRASTUZUMAB 440 MG	1	no	1 x od	After Meal	D
1430	306	12135	XYLOMETAZOLINE 10 ML	10	ml	1 Drop twice a day	LA	D
1424	200	40005	NASAL DROP	4		4 11 2 2	After Mr1	
1431	360	12925	GLUCOSAMINE 250MG +CHONDROITIN SULPHATE	1	mg	1 x od	After Meal	D
			200MG CAP					
1432	1472		OLSERTEST 200MG	1	mg			D
1433	1474	11161	INJ DOPAMINE HCL 40 MG/ML	1	Unit		SOS	٧
1434	2019	12336	5 ML NALTREXONE 50MG TAB	1	ma	1 x od	After Meal	V
1434	2558	12336	INJ DULAGLUTIDE 1.5 MG	1	mg NO	1 x od 1 x weekly	After Meal	V
1436	2858	12075	ED MOXIFLOXACIN +	5	ml	1 Drop twice a day	After Meal	Ē
			DEXAMETHASONE					
1437	3712		ANKLE STRAP MEDIUM	1	NO	sos	After Meal	V
1438 1439	3713 4019	11109	ISOSORBID MONONITRATE 20	60	NO ml	sos 1 tsp x od	After Meal After Meal	V D
1433	4013	11109	MG TAB	00	1111	i top x ou	Aitel Meal	
1440	4832		MALE EXTERNAL CONDOM	1	NO	sos	sos	D
4			CATHETER SIZE M					
1441	4892		FUSIDIC 2% + CLOTRIMAZOLE	1	NO	sos	sos	E
			1% + CLOBETASOL 0.05% OINT					
						•		

1442	Alectinib 150 mg Tab		
1443	Tab Vericiguat 2.5 mg		D
1444	Tab Vericiguat 10 mg		D
1445	Tab Lurasidone 40 mg		D
1446	Inj Pegylated Recombinant Human Erythropoietin (75mcg)		D
1447	Bed Sores dressing any size upto 18 cm x 18 cm		D
1448	Collagen Based Granules		D
1449	Tab Debrafenib (75 mg)		
1450	Tab Magnesium Bisglycinate (360 mg		
1451	Tab Finerenone (10 mg)		